| (November 1983) Formerly 9-331) | DEPARTMENT OF T | HE INTERI | OR verse side) | 5. LEASE DESIGNATION | AND SERIAL NO. |
|--|--|-----------------------|--|---|-------------------|
| SUND | BUREAU OF L. ND M | REPORTS C | N WELLS | 6. IF INDIAN, ALLOTTER | OR TRIBE HAME |
| (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such propossis.) | | | | 7. UNIT AGREEMENT NAME | |
| OIL GAS WELL | OTESE | | | 8. FARM OR LEASE NAM | (2 |
| CONOCO INC. | | | | Thompson 18 Fed. | |
| P. O. Box 460, Hobbs, N.M. 88240 | | | | 10. FIELD AND POOL, O | |
| See also space 17 below.) Unit J | | | | North Mason Delawar 11. SBC, T. E. M., OR BLE. AND | |
| 1980 FSL & 1980 FEL 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | | | Sec. 18-26 | S-32E |
| 30-025-28698 15. ELEVATIONS (Show whether DF, RF, UR, etc.) | | | | Lea | NM |
| 16. | • • • | To Indicate N | ature of Notice, Report, or | | |
| NO | TICE OF INTENTION TO: | | acaa: | QUENT REPORT OF: | |
| TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) | PULL OR ALTER CAMPILE COMPLET ABANDON® CHANGE PLANS | 1 | WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDISING (Other) (NOTE: Report resulting resu | ALTERING OF ABANDONMENT OF INC. | on Well |
| | OMPLETED OPERATIONS (Clearly well is directionally drilled, give | state all pertinent | details, and give pertinent dat ons and measured and true veri | as including estimated dat | e of starting any |
| D The su have no | bject well u o plans to di | vas neve rill this | er drilled by well at this | Conoco a s time. | nd we |
| | ACCEPTED FOR Suck APR 211 | | | | |
| | CARLSBAD, NEV | . MEXICO | | | |
| | | | | | |
| 18. I hereby certify that t | he foregoing is true and correct | . | | 1.1 | |
| SI NED | mi / 10 hele | TITLE | Administrative Supervisor | DATE <u>4-1</u> | 3-86 |
| (This space for Federa | l or State office use) | | | | _ |
| APPROVED FY COMULTIONS OF APP | | TITLE | | DATE | |

*See Instructions on Reverse Side