

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT, RM 88210

Subject Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(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 proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

LC-028784-c

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

C/SF

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Keely C Federal

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Gb-J-SR-Q-Gb-SA

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA

24, T-17-S, R-29-E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

OIL WELL ☐ GAS WELL ☐ OTHER Water injection

2. NAME OF OPERATOR

Phillips Petroleum Company

3. ADDRESS OF OPERATOR

4001 Penbrook Street, Odessa, Texas 79762

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

Unit 0, 660' FSL & 1980' FEL

RECEIVED BY

O. C. D.

ARTESIA, OFFICE

14. PERMIT NO.

API No. 30-015-03077

15. ELEVATIONS (Show whether DP, RT, OR, etc.)

3602' RKB

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

1-20-87 3564' PTD. Began injection at average rate of 69 BWPD at 0 psi through interval 2367'-3478'.

ACCEPTED FOR RECORD

MAR 15 1987

For
CARLSBAD, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED

W. J. Mueller

TITLE Engineering Supervisor, Resery DATE 3-10-87

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

