

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO. *dsf*

NM 70335

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Livingston Ridge Fed

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Cabin Lake (Delaware)

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

Sec. 1, T-22-S, R-30-E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

RECEIVED

2. NAME OF OPERATOR

PHILLIPS PETROLEUM COMPANY

JUL 12 1991

3. ADDRESS OF OPERATOR

4001 Penbrook St., Odessa, TX 79762

O. C. D.
ARTESIA OFFICE

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

Surface : Unit L, 1200' FWL & 2240' FSL

Bottom Hole Location: Unit L, 660' FWL & 1980' FSL

14. PERMIT NO.

30-015-26436

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3307.6' GL; 3318.6' KB

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.)*

5/21/91 Perforate 5-1/2" casing w/4" casing gun 2 JSPF 7352'-7374' - 45 shots.
5/22/91 Treat perforations 7352'-7374' w/550 gal. 7-1/2% NeFe HCL acid.
5/27/91 Fracture treat perforations 7352'-7374' w/17000 gal. polyemulsion w/6000#
20/40 mesh sand
5/28/91 Reset RBP @7300'.
5/29/91 Perforate 5-1/2" casing w/13 shots 7196'-7202' w/4" casing gun, 2 JSPF.
6/1/91 Acidize perforations 7352'-7374' w/550 gal. 7-1/2% NeFe HCL.
6/3/91 Fracture treat perforations 7196'-7202' w/ 9000 gal. polyemulsion w/20000# 20/40
mesh sand.
6/6/91 Perforate 5-1/2" casing w/4" casing gun, 2 JSPF 6610'-6630' - 41 shots.
6/7/91 Treat perforations 6610'-6630' w/500 gal. 7-1/2% NEFE HCL
6/10/91 Treat perforations 6610'-6630' w/34000 gal. polyemulsion w/108000# 20/40 mesh
sand & 32000# 16/30 resin coated mesh sand.
6/22/91 Ran rods and pump. Return to production
Temp. drop until production stabilizes.

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

SIGNATURE

D. M. Sanders

Supervisor

TITLE Regulation and Proration

DATE

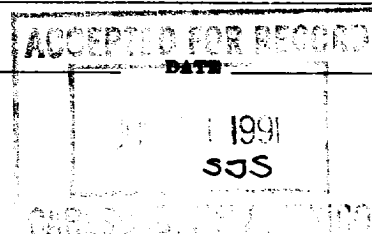
7/3/91

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side