

1625 N. French Dr
Hobbs, NM 88241-1980
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131

New Mexico
Energy Minerals and Natural Resources Department
Oil Conservation Division
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

Form C-14C
Revised 06/95

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
WELL WORKOVER PROJECT

RECEIVED
JUL 12 1999
OIL CON. DIV.
DIST. 3

I. Operator and Well

Operator name & address Phillips Petroleum 5525 Hwy. 64 Farmington, NM 87401						OGRID Number 017654		
Contact Party Patsy Clugston						Phone 505-599-3454		
Property Name Gobernador						Well Number 3		API Number 30-039-21783
UL M	Section 14	Township 29N	Range 5W	Feet From The 1170	North/South Line South	Feet From The 1110	East/West Line West	County Rio Arriba

II. Workover

Date Workover Commenced: 9/18/98	Previous Producing Pool(s) (Prior to Workover): Gobernador Pictured Cliffs
Date Workover Completed: 9/19/98	

III. Attach a description of the Workover Procedures performed to increase production.

IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

State of New Mexico)
) ss.
County of San Juan)
Patsy Clugston, being first duly sworn, upon oath states:
1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature Patsy Clugston Title Regulatory Assistant Date 7-1-99
SUBSCRIBED AND SWORN TO before me this 1st day of July, 1999.
Nancy J. Brown
Notary Public

My Commission expires: 10-8-2001

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on 9/19/98.

Signature District Supervisor <u>SSJ</u>	OCD District <u>3</u>	Date <u>7/16/99</u>
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Phillips Petroleum Company

3. Address and Telephone No.

5525 Highway 64, NBU 3004, Farmington, NM 87401 505-599-3454

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit M, 1170' FSL & 1110' FWL
Section 14, T29N, R5W

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.

SF-078736

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Gobernador

8. Well Name and No.

Gobernador #3

9. API Well No.

30-039-21783

10. Field and Pool, or exploratory Area

Gobernador Pictured Cliffs

11. County or Parish, State

Rio Arriba, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Run tubing
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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

13. 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.)*

9/18/98

MI & RU Dowell coiled tubing unit. SI 2-7/8" master valve & installed new tree. Installed .75" profile nipple on bottom of 1-1/4" coiled tubing. Bleed down pressure to steel pit. RIH w/tubing and tagged fill on bottom @ 3727'. Pulled up to 3700'. Kill tubing annulus w/2 bbls of 2% KCL H2O. Pull flange off tree & set tubing slips. Cut off coiled tubing. Thread tubing stub & installed 1" ball valve. Bottom of tubing set # 3700' & .75" profile nipple @ 3699'. RD & release tubing unit. Turned well back over to production department.

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

Signed Patsy Clayton Title Regulatory Assistant Date 9-24-98

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

ACCEPTED FOR RECORD

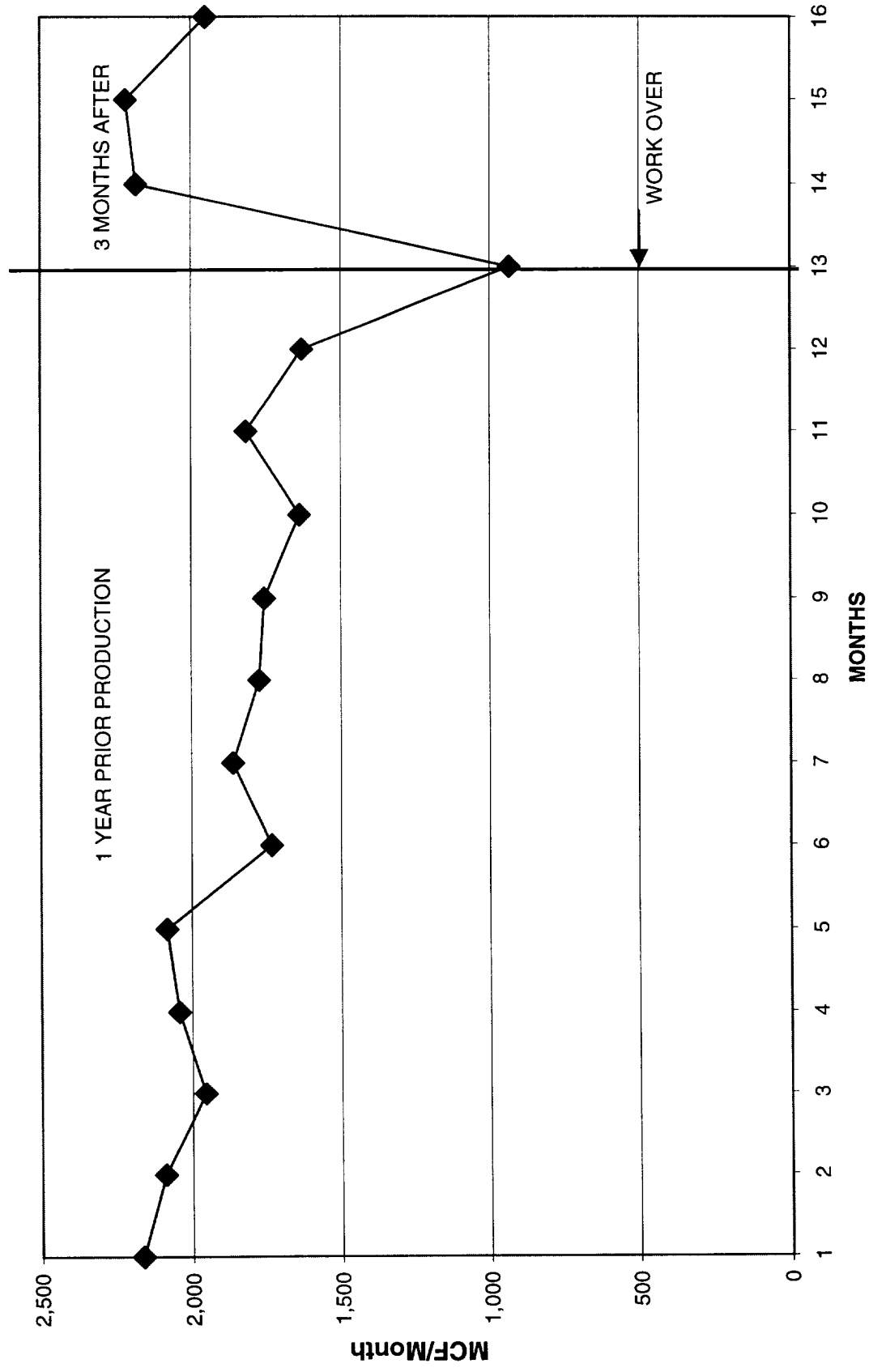
OCT 05 1998

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

* See Instruction on Reverse Side

OPERATOR

Gobernador#3 Workover Production Increase



API #	Gobernador #3	MCF/Month
30-039-21783	1	2,165
	2	2,090
	3	1,956
	4	2,043
	5	2,083
	6	1,733
	7	1,862
	8	1,775
	9	1,757
	10	1,639
	11	1,818
	12	1,630
WORK OVER →	13	934
	14	2,182
	15	2,216
	16	1,952