

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-045-24729

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Phillips Petroleum Company

3. Address of Operator

300 W. Arrington, Suite 200, Farmington, NM 87401

7. Lease Name or Unit Agreement Name

San Juan 29-6 Unit

8. Well No.

236

9. Pool name or Wildcat

Basin Fruitland Coal

4. Well Location

Unit Letter K : 1784 Feet From The South Line and 1733 Feet From The West Line

Section 18 Township 29N Range 6W NMPM Rio Arriba County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Perfs. & Tubing ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

8-3-90
Husky Wireline perforated w/4 spf (.75 diam.) from 2935'-3135', total of 340 shots.
Ran 2-3/8", 4.7#, J-55, 8 RD, EUE tubing set w/Exp. Ck. @ 3111' KB. ND BOP's and
pressure tested to 1700 psi. Pump off Exp. Ck. @ 950 psi - okay. RD & released rig.

RECEIVED

OCT 4 1990

OIL CON. DIV.
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

R. A. Allred

TITLE Drilling Supervisor

DATE 10-3-90

TYPE OR PRINT NAME

R. A. Allred

TELEPHONE NO.

(This space for State Use)

Original Signed by FRANK T. CHAVEZ

APPROVED BY

TITLE

SUPERVISOR DISTRICT # 3

DATE

OCT 04 1990

CONDITIONS OF APPROVAL, IF ANY: