Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office					
DISTRICT I P.O. Box 1980, Hobbs NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088			WELL API NO.		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	30 - 045 - 21321 5. Indicate Type of Lease			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	1		STATE FEE X 6. State Oil & Gas Lease No.		
SUNDRY NOTICES AND REPORTS ON WELLS					
(DO NOT USE THIS FORM FOR PP DIFFERENT RESI (FORM (7. Lease Name or Unit Agreement Name				
1. Type of Well: OIL GAS WELL WELL WELL	OTHER		San Juan 32-7 Unit		
2. Name of Operator		,	8. Well No.		
Phillips Petroleum Company			SJ 32-7 Unit #43		
3. Address of Operator 5525 Highway 64, NBU 3	9. Pool name or Wildcat Basin Dakota				
4. Well Location	O' North	166	:O'		
Unit Letter B : 106	0' Feet From The North	Line and166	50' Feet From The East Line		
Section 21	Township 32N Ra	nge 7W	NMPM San Juan County		
	10. Elevation (Show whether		E.)		
	ppropriate Box to Indicate	1	-		
NOTICE OF I	NTENTION TO:	SUB	SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON L. CHANGE PLANS L. COMMENCE DRILLING			<u> </u>		
PULL OR ALTER CASING L CASING TEST AND CE					
OTHER:		OTHER: ACIDIZE	and attempt to produce X		
12. Describe Proposed or Completed Opwork) SEE RULE 1103.	perations (Clearly state all pertinent deta	alls, and give pertinent dat	tes, including estimated date of starting any proposed		
workstring to clean out 500 psi good test. Rate 1.5 bpm & avg. pre w/1-1/2" tbg and set @	t wellbore. COOH. RIH RU BJ & pumped 1000 gal essure 2500 psi. Releas	w/pkr & set @ 7 of 15% HCL ac sed packer & kno) BOP & NU WH.	ubing. RIH w/scraper & 2-3/8" 7750'. Test casing & packer to id & 90 ball sealers in 4 stages ocked balls off. COOH. GIH Pressure test - good test. RD uction MAY 1 3 1997		
I hereby certify, that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE Regulatory Assistant DATE 5-12-97					
TYPE OR PRINT NAME Patsy Clugston Telephone No.505-599-3454					
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DEPUTY OIL & GAS INSPECTOR, DIST. & MAY 1 3 1997