

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate  
(Other instructions on  
reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.  
Phillips Federal LG063965

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.)

1. OIL WELL  GAS WELL  OTHER  Water Injection Well

2. NAME OF OPERATOR  
Reserve Oil and Gas Company

3. ADDRESS OF OPERATOR  
First Savings Building, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
Unit I, 660' FEL & 1980' FSL Sec. 24, 24S-36E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3306' GR

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME  
Cooper Jal Unit

8. FARM OR LEASE NAME  
Cooper Jal Unit

9. WELL NO.  
213

10. FIELD AND POOL, OR WILDCAT  
Jalmat

11. SEC., T. R., M. OR BLK. AND SURVEY OR AREA  
24-24S-36E

12. COUNTY OR PARISH  
Lea

13. STATE  
N. Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/> Convert to Water Injection	(Other) <input checked="" type="checkbox"/>

(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.)\*

Water injection into the Jalmat zone of this well was authorized by NMOCC Order No. R-4020.

This well has been prepared for water injection as follows:

1. Pulled rods and pump.
2. Pulled 2-3/8" tubing.
3. Cleaned out with sand pump to 3225'.
4. Ran Baker Model AD tension packer and 95 joints cement lined 2-3/8" tubing. Set packer at 2956' in 5 1/2" casing with 15,000# tension.
5. Placed inhibited fresh water above packer in casing annulus.
6. Shut in awaiting completion of injection facilities.

Work completed May 17, 1971.

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

SIGNED [Signature] TITLE District Manager

DATE June 22, 1971

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED [Stamp]

DATE