

459

NM OIL CONS. COMMISSION

Form 3160-5  
(November 1983)  
(Formerly 9-331)

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

5. LEASE DESIGNATION AND SERIAL NO.  
NM LC-028784a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Keely-A Fed

9. WELL NO.  
9

10. FIELD AND POOL, OR WILDCAT  
Grayburg-Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
24, 17-S, 29E

12. COUNTY OR PARISH  
Eddy

13. STATE  
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.)

1. OIL WELL  GAS WELL  OTHER WI

2. NAME OF OPERATOR  
Phillips Petroleum Company

3. ADDRESS OF OPERATOR  
4001 Penbrook St., Odessa, TX 79762

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface  
Unit E, 1980' FNL & 660' FWL

14. PERMIT NO.  
30-015-03072

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

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NOV 2- '89

O. C. O.  
ARTESIA, OFFICE

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 type="checkbox"/>	(Other) <input type="checkbox"/>

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

17. DESCRIBE PROMISED 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.)\*

Proposed procedure to squeeze a casing leak:

MI and RU DDU. Install BOP. Run SLM to check for fill. Clean out as necessary to 2300'. GIH with 6-1/4" swage on 2-3/8" N-80 workstring to 2300'. COOH with swage. GIH with cup-type casing shoe on 4-1/2" OD, 9.5#, J-55, STC liner. Place one centralizer every two joints. Set shoe at 2250'. Drop ball and establish circulation. Pump 250 sxs of "NEAT" Silica Light cement. When cement circulates, close BOPs and pinch back annulus casing valve and squeeze remainder of cement into casing leak at 480'. Do not exceed 500 psi squeeze pressure. SION. RU reverse unit and GIH with drill bit and drill out to TD. Circulate bottoms up and COOH with bit. Swab one day to clean up well. GIH with 4-1/2" plastic coated Baker model A-3 Lok-set packer on 2-3/8" plastic coated tubing. Set packer at 2200'. Contact NMOCD 24 hrs. prior to running casing integrity test. Return well to injection.

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OCT 10 11 09 AM '89

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

SIGNED L. M. Sanders TITLE Reg. & Pro. Supervisor DATE 10/13/89  
L. M. Sanders 915/367-1488

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE PETROLEUM ENGINEER DATE 10-31-89  
 CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side