

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN  
(Other Instru  
verse side)

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

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

PHILLIPS PETROLEUM COMPANY

3. ADDRESS OF OPERATOR

4001 Penbrook St., Odessa, Texas 79762

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

Unit E, 1450' FNL & 660' FWL

14. PERMIT NO.

30-015-26437

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

GL 3303.3'; KB 3314.3'

5. LEASE DESIGNATION AND SERIAL NO.

NM 70335

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Livingston Ridge Fed

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Cabin Lake (Delaware)

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

S1, 22, 30

12. COUNTY OR PARISH

Eddy

13. STATE

NM

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

FRACTURE TREAT

☒

SHOOT OR ACIDIZE

☒

REPAIR WELL

☐

(Other)

PULL OR ALTER CASING

☐

MULTIPLE COMPLETE

☐

ABANDON\*

☐

CHANGE PLANS

☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

FRACTURE TREATMENT

☐

SHOOTING OR ACIDIZING

☐

(Other)

☐

REPAIRING WELL

☐

ALTERING CASING

☐

ABANDONMENT\*

☐

(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.)

1. MI & RU DDU. Pull rods & pump. Install BOP. COOH w/ tbg. GIH w/5-1/2" RBP & RTTS type packer. Set RBP @  $\pm 7380'$ . Set packer & test RBP to 500 psi. Dump 2 sacks sand.
2. Perforate 5-1/2" casing w/4" casing gun, 2 JSPF 7290'-7322', 65 shots.
3. Treat perforations 7290'-7322' w/600 gal. 7-1/2% NeFe HCL acid.
4. Fracture treat perforations 7290'-7322' w/17000 gal. polyemulsion w/60,000# of 20/40 mesh sand.
5. GIH w/ retrieving tool & 5-1/2" RTTS packer on tbg. Retrieve RBP @  $\pm 7380'$ . Reset RBP to  $\pm 6700'$ . Set packer & test RBP to 500 psi. Dump 2 sacks sand. COOH w/tbg. & packer.
6. Perforate 5-1/2" casing w/4" casing gun, 2 JSPF 6568'-6590', 45 shots.
7. GIH w/5-1/2" RTTS packer on tbg. Set packer @  $\pm 6500'$ .
8. Treat perforations 6568'-6590' w/500 gal. 7-1/2% NeFe HCL acid.
9. Fracture treat perforations 6568'-6590' w/34000 gal. polyemulsion w/108,000# 20/40 mesh sand & 32000# resin-coated 16/30 mesh sand.
10. GIH w/retrieving tool on tbg. Retrieve RBP @  $\pm 6700'$  COOH w/ tbg. & RBP.
11. GIH w/ tbg. rods & pump and return to production.

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

SIGNED

*L. M. Sanders*  
L. M. Sanders

TITLE

Supervisor,  
Regulation & Proration

DATE

4/29/91

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

5/6/91

\*See Instructions on Reverse Side