

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐
well well

2. NAME OF OPERATOR
Phillips Oil Company

3. ADDRESS OF OPERATOR
Rm 401, 4001 Penbrook St., Odessa, Tx 79762

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: Unit K, 1980' FS & 1980' FW lines
AT TOP PROD. INTERVAL: same
AT TOTAL DEPTH: same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT, OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) Mechanical Integrity test per BLM request	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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.)*

5-14-85: RU WSU. Installed BOP. Ran 7" csg scraper to 2740'. Circulated hole with 2% KCL water. COOH w/tbg and scraper. Ran 7" Arrow pkr and plug, plug set at 2700'. Tested 7" casing to 500 psi for 15 min. Held ok. Pulled pkr and plug. Returned well to T.A. status.

BOP EQUIP: Series 900, 3000# WP, double w/1 set of pipe rams, 1 set of blind rams, manually operated.

Subsurface Safety Valve: Manu. and Type n/a Set @ Ft.

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

SIGNED [Signature] TITLE Sr. Engineering Specialist DATE May 23, 1985
W. J. Mueller
(This space for Federal or State office use) 915/367-1257 (McLemore)

APPROVED BY TITLE DATE
CONDITIONS OF APPROVAL, IF ANY:

95F

O. C. D.
ARTESIA, OFFICE