

Form 9-330  
Dec. 1983

RECEIVED BY

UNITED STATES NM OIL CONS. COMMISSION

Form Approved.  
Budget Bureau No. 42-R1424

JUN 04 1985

DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Drawer DD  
Artesia, NM 88210

**SUMMARY 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 well ☒ gas well ☐ other ☐

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 ☐

FRACTURE TREAT ☐

SHOOT, OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON\* ☐

(other) Mechanical Integrity test per BLM request X

5. LEASE

NM-04068

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Sivley Federal

9. WELL NO.

3

10. FIELD OR WILDCAT NAME

Henshaw West - Graybury

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

Sec 8, T-16-S, R-30-E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. API NO.

30-015-03873

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3809' DF

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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 **ACCEPTED FOR RECORD** CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JUN 3 1985

\*See Instructions on Reverse Side

CARISBAD, NEW MEXICO