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Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
C. D.
ARTESIA, OFFICE

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 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 P, 330' FSL & 1200' FEL

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) completion of gas connection ☐

5. LEASE
NM 38462

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

KGS-A

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Henshaw-Wolfcamp

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

Sec 14, T-16-S, R-30-E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

14. API NO.

30-015-24792

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

3830.4' GR

(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.)

Gas connection and tank battery equipment has been installed on subject well.
Connection was completed as of December 3, 1984.

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

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

SIGNED W. J. Mueller TITLE Sr. Engineering Specialist DATE January 14, 1985

(This space for Federal or State office use)

APPROVED BY TITLE DATE
CONDITIONS OF APPROVAL, IF ANY