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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

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

RECEIVED
MAR 22 8 44 AM '93

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.)

APR 26 1993

1. OIL WELL [X] GAS WELL [ ] OTHER	5. LEASE DESIGNATION AND SERIAL NO.: LC-060529
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
	7. UNIT AGREEMENT NAME:
2. NAME OF OPERATOR: Phillips Petroleum Company	8. FARM OR LEASE NAME: Beeson "F" Fed
3. ADDRESS OF OPERATOR: 4001 Penbrook Street, Odessa, TX 79762	9. WELL NO.: 14
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: Unit G, 2310' FNL & 2310' FEL	10. FIELD AND POOL, OR WILDCAT: Loco Hills Q-G-SA
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec.31,17-S, R-30-E
14. PERMIT NO.: 30-015-04412	15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3574' DF
	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:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other)			
(Other) Test for Reactivation			[X]	(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 and RU DDU. COOH w/rods. NU Class 2 BOP. COOH w/tubing.
2. GIH with packer and 2-3/8" workstring. Mix 55 gals. sulfate scale convertor (TechniClean 405) with 55 gals. water. Lower Tailpipe to 2840' and spot convertor over openhole interval. Come up hole, set packer at + 2760'. and SI overnight. Swab back load the next day.
3. MI and RU to acidize. Test surface lines to 4500 psi. Pump 1000 gals 15% NeFe.
4. Swab well to clean-up.
5. COOH with packer and tubing. RIH w/test equipment. Test pump to frac tank for approx. 1 week. Based on results well will be reactivated ~~or abandoned~~.

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

SIGNED L. M. Sanders TITLE Supv.Regulatory Affairs DATE 03-18-93

(915) 368-1488

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 4-17-93

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within