

484

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Artesia, NM 88210

5. LEASE LC-028784-C

6. IF INDIAN, ALLOTTEE OR TRIBE NAME --

7. UNIT AGREEMENT NAME --

8. FARM OR LEASE NAME Keely C Fed

9. WELL NO. 53

10. FIELD OR WILDCAT NAME Grayburg-Jackson *22-8-8a*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 26, T-17-S, R-29-E

12. COUNTY OR PARISH Eddy 13. STATE New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) 3590' RKB, 3580' GR

RECEIVED BY
JUN 07 1984
O. 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 different reservoir. Use Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR Phillips Oil Company
(Successor to General American Oil Co.)

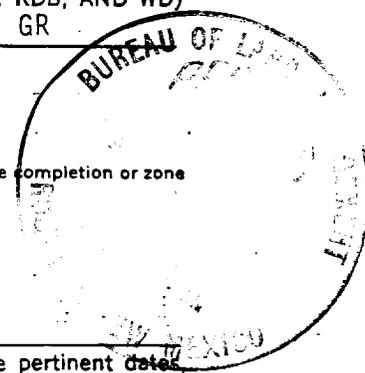
3. ADDRESS OF OPERATOR Room 401
4001 Penbrook St., Odessa, TX 79762

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: Unit F, 1345' FNL & 1880' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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 checked="" 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)			

(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.)*

Recommended procedure to reperformate Grayburg zone, acidize and fracture treat perforations:

MI & RU DDU. COOH w/rods, pump & install BOP. COOH w/tbg. Perforate with 4" O.D. csg gun w/2-1/2" shots/ft. from 2317'-2684' (87'-174 shots). Set RBP @ 2750' & RTTS pkr @ 2275'. Acidize perms w/4125 gals of 7.5% NEFE HCL acid. COOH w/pkr & tbg. Swab load & acid wtr. Frac perms w/52,000 gals of 40# crosslinked KCL wtr containing 68,000# of 20/40 mesh sand and 36,000# of 10/20 mesh sand @ 25+ BPM, Max press of 4500 psi.

Clean out if necessary. COOH w/tbg & RBP. Rerun production equipment and return well to production.

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. Engr'g Spec. DATE April 13, 1984
M. J. Mueller

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE P.E. DATE 4/16/84
CONDITIONS OF APPROVAL, IF ANY: