

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Albuquerque, NM 88210

Expires August 31, 1985

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Phillips Petroleum Company

3. ADDRESS OF OPERATOR

Room 401, 4001 Penbrook Street, Odessa, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

Unit G, 2310'FEL & 1980'FNL

RECEIVED BY

APR 1 1986

79762

ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO.

NM-14847

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Green B Fed

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Empire Abo

11. SEC., T., R., M., OR B.L.K. AND SURVEY OR AREA

Sec 19, T-17-S, R-29-E

14. PERMIT NO.

API No. 30-015-22930

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3698.2'GR

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:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Extension of SI Status

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.) *

Request for extension of SI Status. Evaluation of possible plugback of well to another zone has not been completed at this time.

APPROVED FOR 12 MONTH PERIOD
ENDING 3/31/87

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

SIGNED W. J. Mueller

TITLE Engineering Supervisor,
Reservoir

DATE March 18, 1986

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 3-31-86

*See Instructions on Reverse Side