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Form Approved.
Budget Bureau No. 42-R1424

Artesia

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SEP 11 1984

O. C. D.
ARTESIA OFFICE

5. LEASE	NM 0558580.
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	-----
7. UNIT AGREEMENT NAME	-----
8. FARM OR LEASE NAME	Atalaya-Fed # COM
9. WELL NO.	1
10. FIELD OR WILDCAT NAME	Cedar Lake Morrow
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	Sec 35, T-17-S, R-30-E
12. COUNTY OR PARISH	Eddy
13. STATE	New Mexico
14. API NO.	30-015-24430
15. ELEVATIONS (SHOW DF, KDB, AND WD)	3579.2' Ground (unprepared)

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 <input type="checkbox"/> gas well <input checked="" type="checkbox"/> other
2. NAME OF OPERATOR Phillips Oil Company
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: 1980' FS & 660' FW section lines AT TOP PROD. INTERVAL: 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	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input checked="" type="checkbox"/> (Intermediate)	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/> and (Production)	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>

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

*X(other) Change operator and change lease name.

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.)*

* Originally permitted by Anadarko Production Company March 2, 1983, approval extended to December 31, 1984 by letter dated July 20, 1984.
Propose to change 8 5/8" intermediate casing to 32# K-55 set at 3100' cemented to surface.
Propose to change production casing to 5 1/2" OD 15.5# K-55 and 17# N-80 and K-55 set at TD and cemented sufficient to tie back into intermediate casing.

No - DSTs are planned in drilling this well.

Project official contacts are:

John W. Maharg
Director of Engineering
4001 Penbrook Street
Odessa, Texas 79762
Telephone (915) 367-1204

or

A. A. Hochstein
Area Manager
P. O. Box 2130,
Hobbs, New Mexico 88240
Telephone (505) 393-5121

BOP Equipment: See Attached -
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED W. J. Mueller TITLE Sr. Engineering Specialist DATE 8-27-84
(McLemore (915) 367-1257)

(This space for Federal or State office use)
APPROVED BY: _____ TITLE AREA MANAGER DATE 9-10-84
CONDITIONS OF APPROVAL IF ANY:

Post ID-3
9-14-84
2438 p4
Well name