

Submit 3 Copies
to Appropriate
District Office

DISTRICT I
P. O. Box 1980, Hobbs, NM 88240

DISTRICT II
P. O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

RECEIVED State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P. O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

MAY -9'89

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" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-015-25271
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER SWD <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Phillips Petroleum Company		6. State Oil & Gas Lease No.
3. Address of Operator 4001 Penbrook Street, Odessa, Texas 79762		7. Lease Name or Unit Agreement Name Artesia SWD
4. Well Location Unit Letter <u>Q</u> : <u>330</u> Feet From The <u>south</u> Line and <u>2310</u> Feet From The <u>east</u> Line Section <u>7</u> Township <u>18-S</u> Range <u>28-E</u> NMPM Eddy County		8. Well No. 1
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3604' GE		9. Pool name or Wildcat Artesia Field Area

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

5-03-89: Well backflowed (580 bbls). NMOCN notified. RU to acidize well with 2500 gals of 20% NEFE HCL gelled with 50# per 1,000 gals of Northridge AX-200. Flushed with 38 bbls pf produced water. Left well shut in overnight. Max treating pressure: 810#; avg treating pressure: 675#; Avg Inj. rate 2 BPM Shut in pressures: 5 min 590#, 10 min 520#, 15 min 470# ISIP 740#

5-04-89: Well flowed back to test tank to secure sample for lab analysis. Tubing pressure was 230#. Connected well back to injection system. Released well to the Artesia Gas Plant for injection after plant shutdown complete.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE L. M. Sanders

TYPE OR PRINT NAME L. M. Sanders

TITLE Regulation & Proration DATE May 4, 1989

Supervisor
TELEPHONE NO. 915/367-1488

(This space for State Use)

Original Signed By
Mike Williams

APPROVED BY _____

TITLE _____ DATE MAY 12 1989

CONDITIONS OF APPROVAL, IF ANY: