

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on re-
visions) COMM CON

Project Number 1004-0133
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

4001 Penbrook St. Odessa, Texas 79762

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.)
At surface

Unit I, 1980' FSL & 990' FEL

14. PERMIT NO.

30-015-24455

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

4301' DF, 4282' GR

5. LEASE DESIGNATION AND SERIAL NO.

NM-0512118-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Rocky

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat (Yeso)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 4, T-22-S, R-22-E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANE

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>

(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.)

3-7-86: MI & RU DDU. POOH w/rods & pmp. Installed BOP. Tagged bottom @ 2186'. POOH w/2-7/8" tbg.

3-8-86: Circ hole w/9.6 ppg mud laden fluid. Spotted 50 sx Class C w/2% CaCl from 2186'. Tagged top of cmt @ 1910'. Perf'd 5 1/2" csg w/4SPF @ 260'. Pmpd 70 sx Class C w/2% CaCl. Circ 5 1/2 X 8-5/8" annulus. Circ 10 sx cmt to surface. Cut off CHF, welded on dry hole marker. Cleaned up location.

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

SIGNED

W. J. Mueller

TITLE Engineering Supervisor,
Reservoir

DATE April 10, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Post ID-2
4-25-86
PFA