Submit 3 Copies to Appropriate District Office

DISTRICT II

State of New Mexico Enc = 1, Minerals and Natural Resources Department

Form	C	-1Q	3
Revis	d	1-1	-8

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

P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION REFILE ON P.O. Box 2088

Santa Fe, New Mexico 87504-90281991

WELL API NO. 30-015-25699

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

O. C. D. ARTESIA, OFFICE 5. Indicate Type of Lease STATE XXX FEE 6. State Oil & Gas Lease No.

		K-32/1
Ĺ,	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.)	7. Lease Name or Unit Agreement Name
	Type of Well: OR. GAS WELL XX WELL OTHER	James A
2	Name of Operator	8. Well No.
	PHILLIPS PETROLEUM COMPANY	2
3.		9. Pool name or Wildcat
	4001 Penbrook St., Odessa, TX 79762	Cabin Lake (Delaware)
4.	Well Location	
	Unit Letter J: 1652 Feet From The South Line and 19	80 East Line
	Section 2 Township 22-S Range 30-E	NMPM Eddy County
	10. Elevation (Show whether DF, RKB, RT, GR, etc.) GL 3177'; KB 3188'	
11.	Check Appropriate Box to Indicate Nature of Notice R	eport or Other Data

NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING** TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB Fracture treat well OTHER: 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. Fracture treat perforations 5625'-5658' w/34000 gal. polyemulsion w/108000# 4/4/91 20/40 mesh sand & 32000# 16/30 mesh resin coated sand.

4/5/91 Swabbing back load.

Ran rods and pump. Returned to production. 4/16/91 Pumped 61 BO, 99 BW & 85 MCF. GOR 1391/1. 5/8/91

COMPLETE - DROP FROM REPORT.

SIGNATURE	nation boys is the and complete to the best of my known of the best of the best of my known of the best of the bes	wholge and belief. Supervisor, TITLE Regulation & Proration	7/24/91 [915] 368-1667 TELEPHONE NO.
(This space for State Use)	ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT LI	TITLE	JUL 2 9 1991