

Submit 3 Copies to Appropriate District Office

State of New Mexico
Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

JUN 27 1991

O. C. D.

WELL API NO.
30-015-26031

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
K-3271

7. Lease Name or Unit Agreement Name
James A

8. Well No.
6

9. Pool name or Wildcat
Cabin Lake (Delaware)

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.)

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
PHILLIPS PETROLEUM COMPANY

3. Address of Operator
4001 Penbrook St., Odessa, Texas 79762

4. Well Location
Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line
Section 2 Township 22-S Range 30-E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3217' DF; 3208' GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: Add perforations, acidize & Fracture <input checked="" type="checkbox"/>	

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.

1/10/91 Perforate 5-1/2" casing w/4" casing gun 2 JSPF 7264'-7330', total of 133 shots.
1/14/91 Treat perforations 7264'-7330' w/1500 gal. 7-1/2% NeFe HCL
1/15/91 Swabbing back load.
1/16/91 Treat perforations 7264'-7330' w/34000 gal. polyemulsion w/20/40 mesh sand & 16/30 resin coated mesh sand.
1/31/91 Flowed 160 BO & 50 BW.
2/1/91 Ran tbg, rods & pump. Put well on pump.
2/11/91 Pumped 86 BO & 209 BW.
Drop from report.

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

SIGNATURE Jay M. Sanders TITLE Supervisor, Regulation & Proration DATE 6/26/91
TYPE OR PRINT NAME J. M. Sanders TELEPHONE NO. (915) 368-1667

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
APPROVED BY _____ TITLE _____ DATE JUL 09 1991
SUPERVISOR, DISTRICT II

CONDITIONS OF APPROVAL, IF ANY: