Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources Department			
DISTRICT I P.O. Box 1980, Hobbs NM 88240	OIL CONSERVATION P.O. Box 2088	WELL API NO.	06761	
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210		7504-2088	30-015-26761 5. Indicate Type of Lease STATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	E LXT FEE L
SUNDRY NOTICES AND REPORTS ON WELLS			K-3271 ////////////////////////////////////	
(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 JAMES A	
1. Type of Well: OIL GAS WELL WELL	OTHER DO E	REHWED))	
2. Name of Operator	<u> </u>		8. Well No.	
Phillips Petroleum Com	pany IA	N 1 4 199/	9. Pool name or Wildcat	
3. Address of Operator 4001 Penbrook Street,	Odessa. TX 79762		CABIN LAKE (DEL	AWARE)
4. Well Location Unit Letter P : 125	O' Feet From The	con. Piy	Feet From The	FEL Line
		DIST. 2	n cm r FDDV	
Section 2	Township 22-S Range ////////////////////////////////////	30-E N F, RKB, RT, GR, etc.)	IMPM EDDY	County
	3187.7	'GL; 3196.7'KB	<i>\\\\\\\\</i>	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON RE	EMEDIAL WORK	ALTERING	CASING
TEMPORARILY ABANDON	CHANGE PLANS L CO	OMMENCE DRILLING O	OPNS. LI PLUG AND	ABANDONMENT L
PULL OR ALTER CASING	C/	ASING TEST AND CEM	IENT JOB	
OTHER:		THER: ACIDIZE 5	388'-7408' & RET	T/INJECTN. X
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.				
INJCTN RATE PRIOR T/ACID JOB 2050 BBL/DAY W/TBG PRESS 590#, NMOCD NOTIFIED 24 HRS PRIOR T/ACID JOB, WELL BK-FLOWED F/APPROX 10 HRS, 1150 BBLS APPROX, RU HES, ACIDIZED EXISTING DELAWARE PERFS 5388'-7408' (286 SHOTS) DWN EXISTING 2-7/8" IPC TB W/8000 GAL 15% HV-60 ACID DIVERTED W/3000# GRADED ROCK SALT, 4 STAGES ACID (2000 GAL EA) 3 STAGES ROCK SALT (1000# EA STG IN GELLED BRINE) FLUSHED & OVER-FLUSHED W 150 BBLS 2% KCL WTR, GOOD ACTION F/ROCK SALT BLOCKS, F/APPROX 1055# - 1480#, MAX TREAT PRESS 1480#, AVG INJECTN RATE 3 BPM, ISIP 1076#, TOT LD 340 BBLS, RD HES, LEAVE WELL CLOSED IN F/2 HRS, TBG PRESS 500#, BKFLOW APPROX 2 HRS, RET T/OPERATION TBG PRESS 550# W/RATE OF 2400 BBLS/DAY, JOB COMPLETE.				
DROP WELL F/REPORT				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SEGNATURE SENIOR REGulation Analyst DATE				
TYPE OR PRINT NAME LATTY M. Sa	nders /		TELEPHONE	^{NO.} (915)368-148

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(This space for State Use) The CLORED BY THE W. CUM

APPROVED BY_ CONDITIONS OF APPROVAL, IF ANY: