

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-028793-KC

C/SF

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Burch C. Fed

9. WELL NO.

17

10. FIELD AND POOL, OR WILDCAT

Grayburg-Jackson-SR-Q-Gb-SA

11. SEC., T., R., M., OR B.L. AND  
SURVEY OR AREA

23, 17-S, 29-E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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 C, 660' FNL & 1980' FWL

14. PERMIT NO.

API No. 30-015-20386

15. ELEVATIONS (Show whether OF, RT, OR, etc.)

3598' GR

O. C. D.

ARTESIA, OFFICE

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Convert to Water Injector

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANE

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

SUBSEQUENT REPORT OF:

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.) \*

Recommended procedure to convert well to water injection:

1. MI & RU DDU.

2. COOH with rods and pump. Install BOP. COOH with tubing. GIH with 3-7/8" bit and casing scraper on 2-3/8" work string. Clean out to 3345'. COOH with tubing, scraper and bit.

3. GIH with 4-1/2" RTTS-type packer on tubing. Set packer at  $\pm 2240'$ . Pressure annulus to 500 psi for 15 minutes to verify casing integrity. If casing does not hold pressure, reset packer up hole and retest annulus. Should casing fail to hold pressure casing inspection log will be run.

\*\*See attached pages for additional procedure\*\*

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

SIGNED

W. J. Mueller

TITLE Engr. Supv., Resv.

DATE August 27, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Subject to  
Like Approval  
by State

\*See Instructions on Reverse Side