

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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

0154

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-0546732-A	
2. NAME OF OPERATOR Phillips Petroleum Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 4001 Penbrook St., Odessa, Texas 79762		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit H, 1980' FNL & 330' FEL		8. FARM OR LEASE NAME Christopher "31" Fed.	
14. PERMIT NO. 30-015-27617		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, WT, GR, etc.) 3355' GL		10. FIELD AND POOL, OR WILDCAT Undesignated (Delaware)	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, 23-S, 31-E	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) Flaring exception <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.)*

Phillips Petroleum Company requests a flaring exception for the Christopher "31" Fed. well number 1 pending installation of gas flowline. Flaring exception requested until 11/30/93 @ ±100 MCFPD.

RECEIVED
 NOV 9 11 35 AM '93
 CARLTON
 AREA OFFICE

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

SIGNED L. M. Sanders TITLE Supv. Reg. Affairs DATE 11/8/93
L. M. Sanders 915/368-1488

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) JOE G. LARA TITLE PETROLEUM ENGINEER DATE 12/13/93
 CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side