

055564

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.)

1. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Jack L. Phillips
3. ADDRESS OF OPERATOR Drawer 392, Gladewater, Texas 75647
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
Unit Letter N 330 FSL & 1980 FWL Sec 29, T9S, R30E Chaves County, New Mexico
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4060 G. L.
16. UNIT LETTER N 330 FSL & 1980 FWL Sec 29, T9S, R30E Chaves County, New Mexico
17. FIELD AND POOL OR WILDCAT Many Gates Wolfcamp
18. SEC. T., R., M., OR BLK AND SURVEY OR AREA Sec 29, T9S, R30E
19. COUNTY OR PARISH 20. STATE Chaves N.M.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANT

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other)

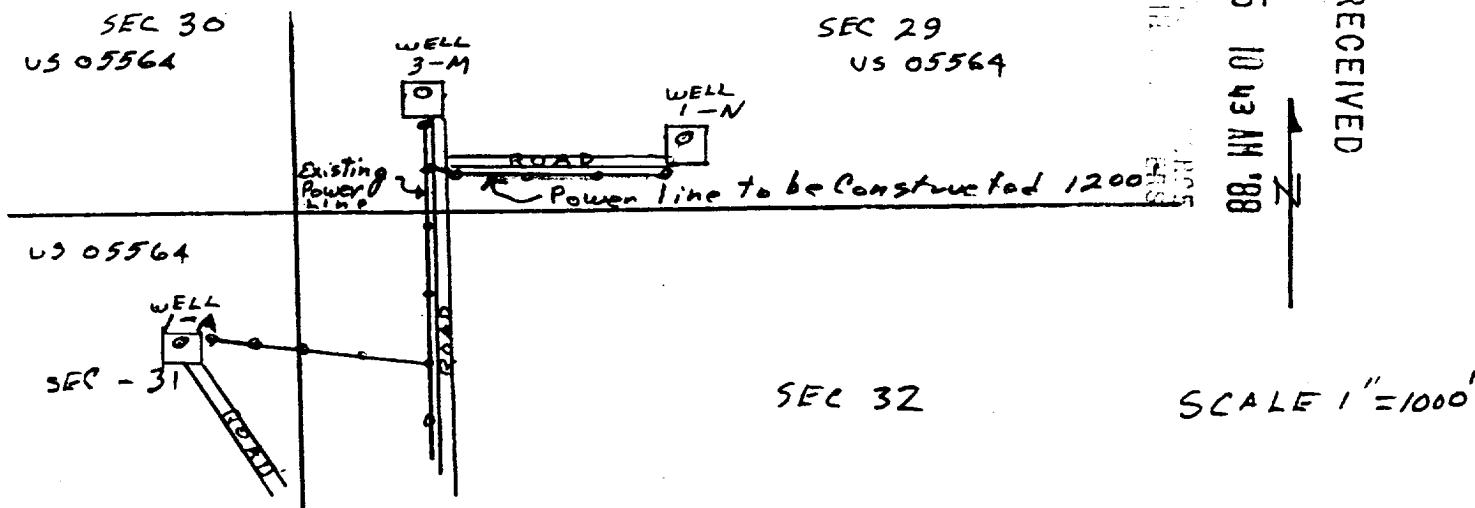
REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(Other) Construct power line to well 1-N

(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.)

Install secondary 480 volt line to Isler Federal 1-N well (New well on lease). Isler Federal No. 1-A & 3-M already have power and we will tie into their existing systems. We will follow suggested procedures for Raptor protection on power lines (Exhibit 13 or 14)



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

SIGNED [Signature] (This space for Federal or State office use)

TITLE Operator

DATE 12/2/88

APPROVED BY /s/ Phil Kirk

TITLE Area Manager

DATE 1-9-89

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side