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NEW MEXICO OIL CONSERVATION COMMISSION

FEB 25 10 48 AM '65

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. <b>E-1233</b>	
7. Unit Agreement Name <b>Ranger Lake Unit Tr. 8</b>	
8. Farm or Lease Name	
9. Well No. <b>3</b>	
10. Field and Pool, or Wildcat <b>Ranger Lake Penn.</b>	
12. County <b>Lea</b>	

**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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator <b>Phillips Petroleum Company</b>
3. Address of Operator <b>Phillips Building - Odessa, Texas</b>
4. Location of Well UNIT LETTER <b>J</b> , <b>1980</b> FEET FROM THE <b>south</b> LINE AND <b>1980</b> FEET FROM THE <b>east</b> LINE, SECTION <b>34</b> TOWNSHIP <b>12S</b> RANGE <b>34E</b> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <b>4166' RKB</b>

16. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> <b>Conversion of well to water injection well</b>

17. 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.

**2-4-65:**

Pulled tubing. Set Baker Model "D" packer at 10,240'. Ran 2-3/8" and 2-7/8" plastic-coated tubing latched into packer at 10240' with tubing anchor seal assembly. Converted oil producing well to water injection well.

Refer Order R-2754

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

SIGNED <u><i>E. M. Davis</i></u>	TITLE <b>Clerical Supervisor</b>	DATE <b>2-23-65</b>
APPROVED BY <u><i>[Signature]</i></u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		