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SANTA FE, NEW MEXICO 87501

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~~O. C. D.~~

CARTESIA OFFICE

API NO. 30-041-20506

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
USE "APPLICATION FOR PERMIT -" (FORM G-101) FOR SUCH PROPOS

2. Indicate Type of Lease
State ☐ Fee ☒

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator
Phillips Petroleum Company

Address of Operator
4001 Penbrook St., Odessa, Texas 79762

Location of Well
UNIT LETTER A . 560 FEET FROM THE north LINE AND 560 FEET FROM
THE east LINE, SECTION 31 TOWNSHIP 5-S RANGE 33E NMPM

7. Unit Agreement Name	
8. Farm or Lease Name	Lambirth A
9. Well No.	4
10. Field and Pool, or Wildcat	Peterson, S. (Fusselman)

15. Elevation (Show whether DF, RT, GR, etc.)
4377' GR

12. County Roosevelt	
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Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: | SUBSEQUENT REPORT

PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
TEMPORARILY ABANDON	<input checked="" type="checkbox"/>		
PULL OR ALTER CASING	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
OTHER _____			<input type="checkbox"/>

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOBS	<input type="checkbox"/>		<input type="checkbox"/>
OTHER _____			<input type="checkbox"/>

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

The subject well was shut down June 15, 1987 as uneconomical to operate. The last well test taken on June 13, 1987 was 0 BOPD and 0 BWPD. Well is to be evaluated for possible plug back.

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

SIGNED W. J. Mueller TITLE Engineering Supervisor, Reserv. DATE July 30, 1987

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ DISTRICT SUPERVISOR _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

AUG 10 1987