

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-05293
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No.

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. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Lease Name or Unit Agreement Name Denton
2. Name of Operator Phillips Petroleum Company	8. Well No. 6
3. Address of Operator 4001 Penbrook St., Odessa, Texas 79762	9. Pool name or Wildcat Denton Devonian
4. Well Location Unit Letter <u>C</u> : <u>659</u> Feet From The <u>North</u> Line and <u>1987</u> Feet From The <u>West</u> Line Section <u>11</u> Township <u>15-S</u> Range <u>37-E</u> NMPM <u>Lea</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3797' GL	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: Perforate and Acidize ☒

12. 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.

9-06-91 COOH w/Sub and TBG.
9-08-91 GIH w/RTTS Packer and RBP, Set RBP at 11,900', Set Packer at 11,783'. Swab 4hrs
9-10-91 Release packer and PU RBP - Reset RBP at 11,805'. Reset RBP at 11,816'. Swab 6hrs
9-11-91 GIH w/TBG PU RBP at 11,816' - Move down to 11,900'. COOH w/RBP, Packer and TBG. GIH w/RBP- Set at 11,900'. Packer set at 11,800'.
9-12-91 Acidize Perfs. (11,818'-11,839') w/1400 Gal. 15% NEFE HCL Pentol Acid. Pump Acid - Flush w/68 BBLs 2% KCL. Swab 4 hrs.
9-14-91 Swab 12 hrs. 9-15-91, Swab 12 hrs. 9-16-91 COOH w/ packer.
9-17-91 GIH w/plug set at 11,900'. COOH w/TBG.
9-21-91 GIH W/sub.
10-10-91 Pumping 24 hrs. 110 Oil, 926 water, 88 gas. Temp. Drop From Report.

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

SIGNATURE L.M. Sanders TITLE Supervisor Reg. & Proration DATE 10-18-91
TYPE OR PRINT NAME L.M. Sanders TELEPHONE NO. 368-1488

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

1001 23 1991

RECEIVED

OCT 22 1991

623

MOSES OFFICE