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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

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

Tract I
1980, Hobbs, NM 88240

Tract II
Drawer DD, Artesia, NM 88210

Tract III
JO Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-05302

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.)

7. Lease Name or Unit Agreement Name

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

Denton

2. Name of Operator
Phillips Petroleum Company

8. Well No.
15

3. Address of Operator
4001 Penbrook St., Odessa, TX 79762

9. Pool name or Wildcat
Denton Devonian

4. Well Location
Unit Letter D : 660 Feet From The North Line and 662 Feet From The West Line

Section 11 Township 15-S Range 37-E NMJM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3802.55' GL 3814' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

9-6-89 thru

4-3-90: MI & RU DDU; installed BOP. COOH w/tbg. Treated w/220 gals Techni-hib 756 mixed w/40 BFW. WIH w/test submersible pump on 2-7/8" tbg. Acidized w/5000 gals 20% NEFe II HCl containing 250 gals Techni-wet 425 and 2 gals/1000 gal corrosion inhibitor plus one gal/1000 gals NES-200 and 600# rock salt. Ran Reda pump; test pumped.

4-4-90: Pumped 24 hrs; 56 BO, 299 BW, GOR 589 CF/BBL.
Job complete.

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

SIGNATURE

J. L. Maples

TITLE

Assist., Reg. & Pro.

DATE 6/21/90

TYPE OR PRINT NAME

J. L. Maples

TELEPHONE NO. 367-1411

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

