

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. 30-025-23075
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-9642
7. Lease Name or Unit Agreement Name Chem State
8. Well No. 4
9. Pool name or Wildcat Tulk (Wolfcamp)

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 ☐	
2. Name of Operator Phillips Petroleum Company	
3. Address of Operator 4001 Penbrook Street, Odessa, Texas 79762	
4. Well Location Unit Letter <u>I</u> : 1980 Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>4</u> Township <u>15-S</u> Range <u>32-E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4303' GR, - 4319' 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: Stimulate & Acidize Well ☒

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.

1-07-92 MIRU DDU POOH w/rods. NU BOP release TAC, COOH w/tbg.
1-08-92 GIH w/packer test Tbg to 5000#. Set packer 9700', load casing w/2% KCL.
1-09-92 Treat well w/4500 gal 15% LCA.
1-13-92 COOH with Tbg. L/D packer.
1-14-92 GIH with Tbg and anchor. Hang well on and started pumping.
1-20-92 Pumped 6 BOPD, 9 BWPD, 9 MCF. 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 2-7-92
TYPE OR PRINT NAME L.M. Sanders (915) TELEPHONE NO. 368-1488

(This space for State Use)

Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE FEB 11 '92

CONDITIONS OF APPROVAL, IF ANY: