

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 068947

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Lusk Deep Unit A

8. FARM OR LEASE NAME

Lusk Deep Unit A "COM"

9. WELL NO.

13

10. FIELD AND POOL, OR WILDCAT

Lusk Morrow

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

18, 19-S

12. COUNTY OR PARISH

Lea

13. STATE

NM

1. ☐ OIL
WELL ☐ GAS
WELL ☒ OTHER

2. NAME OF OPERATOR

Phillips Petroleum Company

3. ADDRESS OF OPERATOR

Room 401, 4001 Penbrook St., Odessa, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1980' FS&W lines (Unit K)

14. PERMIT NO.

dated 2-11-75

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3587' Gr.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) * Morrow gas zone only

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-
nent to this work.)*Prepare to abandon Morrow zone - perforations 12,126' - 12,414' w/125 sx Class H
cement w/0.1% LWL w/TOC at approximately 11,700'.Perforate and test undesignated Atoka zone approximately 11,678' - 11,686'; test,
and complete.BOP Equipment Service 900,3000# WP, double, w/one set pipe rams, one set blind rams, manually
18. I hereby certify that the foregoing is true and correct operated.SIGNED W. J. Mueller TITLE Senior Engineering Specialist DATE October 17, 1979

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE

APPROVED

NOV 08 1979

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side