

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

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—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 801	
2. NAME OF OPERATOR Phillips Petroleum Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
3. ADDRESS OF OPERATOR Room 806, Phillips Bldg., Odessa, Texas 79761		7. UNIT AGREEMENT NAME _____	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  (Unit F) 2310' FN & 1720' FW lines		8. FARM OR LEASE NAME Williams	
14. PERMIT NO. Approved 3-24-76		9. WELL NO. 7	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) later		10. FIELD AND POOL, OR WILDCAT Corbin Abo	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 34, 17-S, 33-E	
		12. COUNTY OR PARISH Lea	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Intermediate Csg. <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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 pertinent to this work.) \*

Drilled 11" hole 7/351' to 4614'. Set 111 jts (4614') 8-5/8" OD 32# N-80 and K-55 csg at 3614'. Howco cemented w/400 sx Trinity LW cmt w/10% DD, 7 1/2# salt, 1/2# Flocele & 5# Gilsonite/sx, followed by 150 sx Class C cmt. Plug to 4572' w/278 BW. Max press 1000#, bumped plug w/1300#. Rotated csg at 25 RPM. Job complete 4:45 AM, 4-23-76. WOC 18 hrs. Ran PPCo temp survey, top cmt at 2560'.  
4-24-76: Tested csg & BOP w/2000#. Drld cmt f/4572-4614'. Tested shoe to 600# for 1/2 hr, ok. Started drlg ahead in 7-7/8" hole at 4614'.

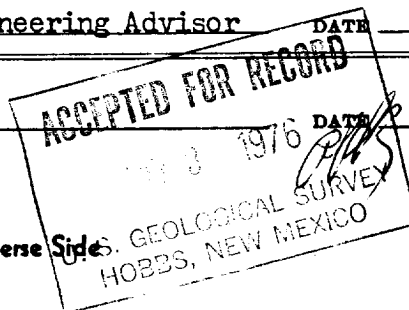
18. I hereby certify that the foregoing is true and correct

SIGNED W. J. Mueller TITLE Engineering Advisor DATE 4-29-76

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:



\*See Instructions on Reverse Side.