

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. 30-025-28054
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-2317
7. Lease Name or Unit Agreement Name Mable
8. Well No. 5
9. Pool name or Wildcat Vacuum Gb/SA

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER WI (Per Order R-7103)	
2. Name of Operator Phillips Petroleum Company	
3. Address of Operator 4001 Penbrook Street, Odessa, Texas 79762	
4. Well Location Unit Letter <u>E</u> : <u>1230</u> Feet From The <u>North</u> Line and <u>110</u> Feet From The <u>West</u> Line Section <u>35</u> Township <u>17-S</u> Range <u>34-E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4022' GR, 4032' RKB	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

REVISED REPORT (PREVIOUS REPORT DATED 08-30-90).

08-01-90: RU DDU. COOH w/tubing and injection packer.

08-02-90: Acidize w/20% NEFe HCl load. Pump 6000 gals acid. Pump 700 lbs. graded rock salt mixed in 700 gals. 10 ppg brine. Flush to bottom perf w/21 BFW.

08-03-90: GIH w/146 jts 2-7/8" plastic coated tubing and Baker Model AD-1 injection packer. RD MO DDU. Place well on injection. Temporarily drop from report. Pkr.@ 4475'.

08-04-90: Pressure tested to 500#; OK.

08-15-90: Injecting down tubing and through perfs 4546'-4586'.
Job complete.

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

SIGNATURE Jay M. Sanders TITLE Regulation & Proration Supervisor DATE 12-28-90
TYPE OR PRINT NAME J. M. Sanders TELEPHONE NO. 915/368-1488

(This space for State Use)

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

MAN 012 1991