

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 066126-C

6. IF INDIAN, ALIOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Phillips Petroleum Company

3. ADDRESS OF OPERATOR

Room 711, Phillips Building, Odessa, Texas 79760

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

Unit K, 1650' FS & W lines

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Cruces

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Lynch-Yates/7 Rivers

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

26, 20-S, 34-E

14. PERMIT NO.

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

3725' DF

12. COUNTY OR PARISH 13. STATE

Lea

N. Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING ☒

ABANDONMENT*

(Other)

(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.)*

2-28-72: Cardinal treated Yates down csg through perfs 3615-43' w/500 gals Para Clean acid, flushed w/60 BO. Treatment under vacuum. Pumped and tested well, restored to production.

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

SIGNED

W. J. Mueller

TITLE Senior Reservoir Engineer

DATE 3-24-72

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE