

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.  
NM-0-31621 B

## 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"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
2. NAME OF OPERATOR Phillips Petroleum Company		7. UNIT AGREEMENT NAME ---
3. ADDRESS OF OPERATOR Room 711 Phillips Bldg., Odessa, Texas 79760		8. FARM OR LEASE NAME Hobbs
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  660' FS & W Lines		9. WELL NO. 3
14. PERMIT NO. ---		10. FIELD AND POOL, OR WILDCAT Eunice Monument
15. ELEVATIONS (Show whether DF, RT, GR, etc.) DF 3573'		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 18-20S, 37E
		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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input 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.)\*

3-14-72: MI Well service unit, pulled rods and pump. B-J treated open hole 3760-3870' down tbgs w/500 gals Shurshot acid flushed w/25 BO down tbgs, 140 BO down csg. Treated under vacuum. Ran rods and pump. Released unit, restored well to pumping production status.

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

SIGNED W. J. MuellerTITLE Senior Reservoir EngineerDATE 4-11-72

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

ACCEPTED FOR RECORD

APR 13 1972

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

\*See Instructions on Reverse Side

RECEIVED

APR 10 1972

OIL CONSERVATION COMM.  
HOUSTON, TEX.