

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPL  
(Other instruction  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Federal LC 031621 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mexico

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Eunice-Monument GB-SA

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

18, 205, 37E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Phillips Petroleum Company

3. ADDRESS OF OPERATOR

Phillips Bldg., Odessa, Texas 79761

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

At surface

Unit Letter A, 330 ft. from the North Line and 330 ft. from  
the East Line, Section 18, T-20-S, Range 37-E, NMPM.

14. PERMIT NO.

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

3564 ft. DF

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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

Status report-Shut in.

(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.)

Shut down effective 2-7-74. Will be held for possible use in secondary recovery.  
Extension requested.

This approval of temporary  
abandonment expires

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

SIGNED W.J. Mueller

TITLE Engineering Advisor

DATE 12-8-75

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side