NMOCC

Form 9-331
(May 1963)

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC 031621 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: --

1. OIL WELL ☐ GAS WELL ☒ OTHER: Associated

7. UNIT AGREEMENT NAME: --

2. NAME OF OPERATOR: Phillips Petroleum Company

8. FARM OR LEASE NAME: Mexico

3. ADDRESS OF OPERATOR: Room 711, Phillips Bldg., Odessa, Texas 79761

9. WELL NO.: 1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 330' FN and E Lines (Unit A)

10. FIELD AND POOL, OR WILDCAT: Monument

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 18. 20-S. 37-E

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3564' DF.

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	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Shut well in			☒
(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.)*

Shut down effective 2-7-74. Cancel allowable.

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

SIGNED W.J. Mueller TITLE Senior Reservoir Engineer DATE 2-11-74

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OK MS

*See Instructions on Reverse Side

[illegible] procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State offices.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: [illegible] of abandonment should include such special information as is required by local Federal and/or State offices. In addition, [illegible] any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; [illegible] below, between and above plugs; amount, size, method of [illegible] liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1963—O-[illegible]