Form 9-331 (May 1963)

TEST WATER SHUT-OFF

FRACTURE TREAT

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

Form approved. Budget Bureau No. 42-R1424.

5.	LEASE	DESIGNATION	AND	SERIAL	NO.
	NM-2244				

REPAIRING WELL

ALTERING CASING

G	NM-2244			
(Do not use this form for propose	CES AND REPORTS ON WELLS als to drill or to deepen or plug back to a different reservoir. TION FOR PERMIT—" for such proposals.)	6. IF INDIAN, ALLOTTE	OR TRIBE NAME	
OIL GAS WELL OTHER		7. UNIT AGREEMENT NA	ME	
2. NAME OF OPERATOR	8. FARM OR LEASE NAME			
ELK OIL COMPANY	Phillips Federal			
3. ADDRESS OF OPERATOR			9. WELL NO.	
Post Office Box 310, B	1			
	early and in accordance with any State requirements.*	State requirements.* 10. FIELD AND POOL, OR WILDCAT Wildcat - Undesignated 11. SEC., T., B., M., OR BLE. AND SURVEY OR AREA Sec 12-23S-37E		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISE	13. STATE	
	3322 GR	Lea	NM	
16. Check Ap	propriate Box To Indicate Nature of Notice, Report, o	r Other Data		

ABANDON MENT* SHOOTING OR ACIDIZING ABANDON* SHOOT OR ACIDIZE (Other) _ Casing CHANGE PLANS REPAIR WELL (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

WATER SHUT-OFF

FRACTURE TREATMENT

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.)* Spudded well on 11/29/85 and drilled to 1,160'. Ran 1,160' of 13 3/8", 72#, N-80 Casing. Cemented w/ 800 sxs Class C. w/ 4% gel and $\frac{1}{2}$ # Flocele. Tailed by 200 sxs Class C w/ 2% CaCl and $\frac{1}{2}\#$ Flocele. Plug down @ 3:15 p.m. circulated 200 sxs. WOC 18 hrs. Tested to 1000# for 30 minutes, test okay.

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

President TITLE .

December 13, 1985

State office use) (This space for Federal

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

DATE .