

UNITED STATES
DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

API No. 30-025-27890

GEOLOGICAL SURVEY

N. M. OIL CONS. COMMISSION

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"/> | | 7. UNIT AGREEMENT NAME ---- | |
| 2. NAME OF OPERATOR Phillips Petroleum Company | | 8. FARM OR LEASE NAME Custer B-Fed | |
| 3. ADDRESS OF OPERATOR Room 401, 4001 Penbrook St., Odessa, Texas 79762 | | 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 1980' FNL and 660' FEL | | 10. FIELD AND POOL, OR WILDCAT Custer Tansil | |
| 14. PERMIT NO. NA | | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3198.2 GR (Unprepared) | |
| | | 12. COUNTY OR PARISH Lea | |
| | | 13. STATE N. Mex. | |

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

NOTICE OF INTENTION TO:

| | |
|---|---|
| TEST WATER SHUT-OFF <input checked="" type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) Commence operations <input checked="" type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <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.)

7-27-82: MI and RU Warton drlg rig #8.

7-28-82: Spudded 12-1/4" hole and drlg ahead.

7-29 and

7-30-82: Reached csg point and rng csg. Ran 38 jts of 8-5/8" csg set @ 1504'. BJ cmted W/600 sxs TLW, 10% DD, 1/4# pr sx cellophane followed by 150 sxs Class "C" W/2% CaCl. WOC 8 hrs. Cut off csg, NU BOP, tested csg to 1500# for 30 mns. O.K. Total WOC before test 18 hrs.

7-31-82: Drlg ahead at midnight 7-31-82.

8-1 and

8-2-82: Drlg ahead.

8-3-82: Reached TD-3700'- at 1:30 P.M., 8-3-82. POOH. RU Schlumberger and started logging. Ran CNL-FDC-GR/Cal form TD to 1500'.

BOP EQUIP: 3000 psi W. P.

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

SIGNED *[Signature]* TITLE Senior Engineering Specialist

DATE August 5, 1982

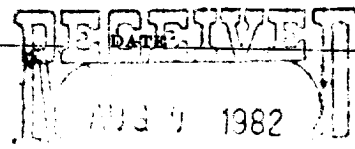
APPROVED BY
CONDITIONS OF

APPROVAL OF *[Signature]* DATE OCT 5 1982

TITLE

U.S. GEOLOGICAL SURVEY
ROS WELL, NEW MEXICO

See Instructions on Reverse Side



OIL & GAS
U.S. GEOLOGICAL SURVEY
ROS WELL, NEW MEXICO

434

RECEIVED

OCT 6 1982

O.C.D.
HOEDS OFFICE