

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

**DISTRICT I**

P.O. Box 1980, Hobbs NM 88241-1980

**DISTRICT II**

P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30-039-21486

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:  
OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator  
Phillips Petroleum Company

3. Address of Operator  
5525 Highway 64, NBU 3004, Farmington NM 87401

4. Well Location  
Unit Letter 0 : 1150' Feet From The South Line and 1840' Feet From The East Line

Section 14 Township 29N Range 5W NMPM Rio Arriba County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Run tubing ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

9/18/98

ND WH & NU coiled tubing head. MI & RU Dowell Coil tubing unit. Retreaded coil tubing and installed .75" profile nipple w/pump out plug in bottom. Thread bottom of tubing. GIH w/1-1/4" coiled tubing. Tagged fill on bottom @ 3491'. Pulled up to 3440'. Pumped 6 bbls of 2% KCL down tubing annulus killing well. Pull flange & set slips. Clamped tubing and cut off. Screwed on cap. thread tubing stub and installed 1" valve. RD coil tubing unit. Turned well back over to production department.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Patsy Clugston TITLE Regulatory Assistant DATE 9-21-98

TYPE OR PRINT NAME Patsy Clugston TELEPHONE NO. 505-599-3454

(This space for State Use)

ORIGINAL SIGNED BY CHARLIE T. PERRIN

DEPUTY OIL & GAS INSPECTOR, DIST. #3

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: