Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

| DIOTRICT I | OIL CONSERVA | TION | N DIVISION | | |
|---|---|---|---|--|--|
| DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980 | 2040 Pac | | | WELL API NO. 30-039-2 <u>6301</u> | Ì |
| DISTRICT II | Santa Fe, 1 | NM 87 | 505 | 5. Indicate Type of Lease | |
| P.O. Drawer DD, Artesia, NM 88210 | | | | STATE L. | FEE X |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 | | | | 6. State Oil & Gas Lease No. | |
| SUNDRY NOT | ICES AND REPORTS ON V | WELL: | 3 | | |
| (DO NOT USE THIS FORM FOR PRO | DPOSALS TO DRILL OR TO DEE RVOIR. USE "APPLICATION FOR -101) FOR SUCH PROPOSALS. | PEN OF | PLUG BACK TO A | 7. Lease Name or Unit Agreement Nam 009256 | ne |
| 1. Type of Well: | -101) FOR 30CH FROM 03AE3. | - ₽ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | (i) | San Juan 29-5 Unit | |
| OIL GAS WELL X | OTHER | 100 m | MAR 2000 | | |
| 2. Name of Operator | | 2 | RECEIVED A | Well No. | |
| Phillips Petroleum Company | | 13 | RECENDIV OLONDIV | 66M Pool name or Wildcat | |
| 3. Address of Operator | Earmington NM 87401 | E. | | Basin Dakota | |
| 5525 Highway 64, NBU 3004, 1 | -armington nm 0/401 | `` | 1/2 | | |
| 4. Well Location Unit Letter E : 2110 | Y Feet From The NO | rth \ | 92 Garage 2 92 | 5' Feet From The West | Line |
| Section 33 | Township 29N | Ran | se 5W | NMPM Rio Arriba | County |
| | 10. Elevation (Show | whether | DF, RKB, RT, GR, et 6549' | c.) //////////////////////////////////// | |
| 11. Check A | opropriate Box to Indi | cate N | lature of Notice, | Report, or Other Data | |
| | NTENTION TO: | | SUE | SSEQUENT REPORT C |)F: |
| | | $ \Box $ | DELEDIAL MORK | ALTERING CASIN | _в П |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | 님 | REMEDIAL WORK | তে | |
| TEMPORARILY ABANDON | CHANGE PLANS | | COMMENCE DRILLING | GOPNS. LA PLUG AND ABANI | JONMEN 1 - |
| PULL OR ALTER CASING | | | CASING TEST AND C | | X |
| OTHER: ————— | | | OTHER: 4 1/2" Ca | asing Report | |
| 12. Describe Proposed or Completed Opwork) SEE RULE 1103. | perations (Clearly state all pertin | ient deta | ils, and give pertinent d | ates, including estimated date of starting | ; any proposed |
| ahead to 7956' TD reach RU BJ to cmt. NU 4-1/2" wtr. 10 bbls gelled wtr 5#/sx Gilsonite, 0.2% (w/0.3% FL-25. 1/4#/sx (& 140#. Bumped plug @ 1 cmt: 180-sxs (347 cu/fi | ned @ 06:00 hrs 3/26/00 hrs 3/26/00 hrs 4/26/00 hrs 4/26/26/26/26/26/26/26/26/26/26/26/26/26/ | . Circ as @ 1 d cmt: d @ 12 xed @ Set. 2 . Tail 3 bbls | 1. COOH. RIH W/4- 00#. PT lines to 180sxs (381 cu/ 2.3 ppg, Yld=2.13 15.2 ppg & yld=1 2.nd stg cmt: 10 b cmt: 50 sxs (70 5 @ 3 BPM & 140-8 5talled, TOC & cas | O psi. PT gas line to 800 psi. PT gas line to 800 psi. 1/2"11.60#, N-80 casing & sc. 4000#-OK. 1st stg cmt:5 bb ft) CL H 35:65 POZ w/6% gel. Tail cmt: 50sxs (63 cu/ft.27 Displace plug w/122 bbl bls gelled wtr. 10 bbls dye cu/ft) Type 3 w/1% CACL-2 coo# @ 22:10 hrs w/1430#. Plaing PT when removed. Plans 4:00 am 3/28/00. | ls 2% KCL , 10#/sx CF) CL H cmt s @ 6.5 BPM str. Lead 1/4#/sx cf, ug held. No |
| | | | | | |
| I hereby certify that the information above | is true and complete to the best of my | knowledge | e and belief. | rictant ' | 3/28/00 |
| SIGNATURE VICEU | and | TIT | LE <u>Regulatory Ass</u> | sistant DATE | <u> </u> |
| TYPE OR PRINT NAME | | | | TELEPHONE NO. | = |
| (This space for State Use) | | | NUMBER OF PERSONS | as inspector, dist. 🙉 MAR | ₹ 2 ₽ 2000 |
| ORIGINAL SIGNED BY | CHARLE T. PERIUM | TE | LE | DATE | |
| CONDITIONS OF APPROVAL, IF ANY: | | ''' | | | |
| CONDITIONS OF APPROVAL, IF ANT. | | | | | |