Submit 3 Copies to Appropriate

APPROVED BY\_\_\_

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

District Office	Energy, Winiciais and Natura	Resources Department	Re	evised 1-1-89
DISTRICT I	OIL CONSERVAT			
P.O. Box 1980, Hobbs NM 88241-1980 DISTRICT II	2040 Pacheco St. Santa Fe, NM 87505		WELL API NO. 30-039-25497	
P.O. Drawer DD, Artesia, NM 88210	Salita re, Niv	1 8/303	5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE L	FEE X
			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 RESER (FORM C-	RVOIR. USE "APPLICATION FOR PE 101) FOR SUCH PROPOSALS.)	N OR PLUG BACK TO A ERMIT"	7. Lease Name or Unit Agreement	t Name
1. Type of Well: OIL GAS WELL WELL X	other	017654	San Juan 30-5 Unit	009258
2. Name of Operator Phillips Petroleum Company			8. Well No.	
3. Address of Operator	<del> </del>		SJ 30-5 Unit #22A  9. Pool name or Wildcat	
5525 Highway 64, NBU 3004, Fa	armington NM 87401		Basin DK - 71599 & Blan	ico MV -72319
4. Well Location Unit Letter P : 801'	Feet From The South	Line and 793		astLine
Section 17	Township 30N	Range 5W	NMPM Rio Arriba	O to
		her DF, RKB, RT, GR, etc	.)	County
11. Check Apr	propriate Box to Indicate	Nature of Notice	Parant on Other Detail	
NOTICE OF IN	TENTION TO:		SEQUENT REPORT	· OE.
		305	SEQUENT NEPORT	OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CAS	sing L
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABA	ANDONMENT [
PULL OR ALTER CASING		CASING TEST AND CEN	MENT JOB	
other: ——————		OTHER: Commingle	notification	
12. Describe Proposed or Completed Opera	tions (Clearly state all portinent de			
work) SEE RULE 1103.	nons (Citarry state an periment de	aus, and give pertinent date	s, including estimated date of start	ing any proposed
As of 2/2/99 production for	rom both the Blanco Mesav	erde and Basin Dako	ta zones was commingled	per
Administrative Order DHC	- 2026.			•
				ing the second
				2 11 14 11
				73
			Fig. 1	H.V.
_			* **	
I hereby certify that the information above is true	and complete to the best of my knowledge	and belief.		
SIGNATURE Talsy	lugitor	Regulatory	Assistant DATE	2/9/98
TYPE OR PRINT NAME Pa	$\mathcal{O}$			
	atsy Clugston		TELEPHONE NO. 50	<u>05-599-3454</u>
(This space for State Use)		PERIOD OF A CO.		
ORIGINAL SIGNED EN	-	DEPUTY OIL & GAS IN	SPECTOR, DIST. #3 FFD	<b>1</b> ()
CONDITIONS OF APPROVAL, IF ANY:	TITI		DATE	1.0 <sub>1399</sub>