

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

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

WELL API NO.	30-039-25658
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	E-347-41
7. Lease Name or Unit Agreement Name	
009258 San Juan 30-5 Unit	
8. Well No.	#110M
9. Pool name or Wildcat	
Basin DK - 71599 & Blanco MV - 72319	

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	017654
2. Name of Operator Phillips Petroleum Company	
3. Address of Operator 5525 Highway 64, NBU 3004, Farmington NM 87401	
4. Well Location Unit Letter <u>E</u> : <u>1840'</u> Feet From The <u>North</u> Line and <u>790'</u> Feet From The <u>West</u> Line Section <u>16</u> Township <u>30N</u> Range <u>5W</u> NMPM Rio Arriba, County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6345'	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: Report actual date well commingled <input checked="" type="checkbox"/>	

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.

Production from both the Basin Dakota and Blanco Mesaverde intervals was commingled as of 11/26/97.

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 12/1/97
TYPE OR PRINT NAME Patsy Clugston

TELEPHONE NO. 505-599-3454

(This space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ

CONDITIONS OF APPROVAL, IF ANY:

TITLE SUPERVISOR DISTRICT # DATE 000 - 1997