| Office Office  | State of Ne  |  |  |  |  | Form                               |          |
|--|--|--|--|--|--|------------------------------------|----------|
| District I<br>1625 N. French Dr., Hobbs, NM 87240  | Energy, Minerals and   | Natu   | rai Resources  | WELL API NO  |  | vised March 2                      | 25, 1999 |
| District II  | OIL CONSERVATION DIVISION  |  |  | 30-039-26433   |  |                                    |          |
| 811 South First, Artesia, NM 87210<br>District III   | 2040 South Pacheco   |  |  | 5. Indicate Type of Lease                                  |  |                                    |          |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV  | Santa Fe, N  | 8 M  | 7505   | STATE  |  | EE 🗌                               |          |
| 2040 South Pacheco, Santa Fe, NM 87505   |  |  |  | 6. State Oil & E-347-40                                    | Gas Lease N                              | ło.                                |          |
| SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROPO<br>DIFFERENT RESERVOIR. USE "APPLIC<br>PROPOSALS.)  1. Type of Well: Oil Well Gas Well X  |  | PEN (  | OR PLUG BACK TO A  | 7. Lease Name<br>San Juan 31-                              |  | reement Na                         |          |
| 2. Name of Operator  | Other  | <u> </u>   |  | 8. Well No.  | <u></u>                                  |                                    |          |
| Phillips Petroleum Company   |  | 0176   | 554  | SJ 31-6 Ur   | nit #42M                                 |                                    | ŀ        |
| 3. Address of Operator   |  |  |  | 9. Pool name or Wildcat                                    |  |                                    |          |
| 5525 Highway 64, NBU 3004, F   | armington, NM 87401  |  |  | Basin DK-715   | <u>99: Blanco</u>                        | MV-72319                           |          |
|  |  |  |  |  |  |                                    |          |
| Unit Letter <u>C</u> :   | 1090' feet from the  | Nor  | th line and  | 1870' feet   | from the                                 | West                               | line     |
| Section 36   | Township 3   |  | Range 6W   | NMPM   | Coun                                     | ty Rio Ar                          | riba     |
|  | 10. Elevation (Show wh   |  |  | c.)  |  |                                    |          |
| 11 Check A   | Appropriate Box to Ind   |  | 88' GL<br>Nature of Notice   | Report or Ot   | her Data                                 |                                    |          |
| NOTICE OF INT  | * * *  | ircaic   | ·  | SEQUENT F  |  | OE.                                |          |
| PERFORM REMEDIAL WORK  | PLUG AND ABANDON   |  | REMEDIAL WORK  | OLQOLIVII  |  | RING CASI                          | NG       |
| TEMPORARILY ABANDON  | CHANGE PLANS   |  | COMMENCE DRILLI  | NG OPNS.   |  | S AND<br>NDONMENT                  | _        |
| PULL OR ALTER CASING   | MULTIPLE<br>COMPLETION   |  | CASING TEST AND<br>CEMENT JOB  |  |  | 1DOMNEN I                          |          |
| OTHER:   |  |  | OTHER: 4-1/  | 2" casing rep  | ort                                      |                                    | 1        |
| 12. Describe Proposed or Complete of starting any proposed work). or recompilation.  | -  | -  | ertinent details, and gi   | ve pertinent date  | es, including                            | •                                  |          |
| RiH w/6-1/4" bit & drille w/4-1/2", 11.6#, I-80 cas bbls H20. Then pumped 26 Cello-flake. Pumped tail Gilsonie, 0.3% FL-25. Di ND BOP. Set slips and cu 3060'. Will show PT for  | ing and set @ 8036'.<br>5 sx (562 cf - 100 bbl<br>- 50 sx (63 cf - 12.3<br>splaced w/124 bbls FW.<br>t off casing. RD & re | RU to slud should be shown to show the showing the sho | o cement. Pumped<br>rry) Type III, 35/<br>slurry) Class H c<br>ug down @ 0830 hrs<br>ed rig 10/2/00. T | 10 bbls KCl,<br>65 POZ, 6% Be<br>ement, 1/4#/s<br>12/2/00. | 10 bbls mu<br>entonite, 1<br>sx Cello-fl | ud flush &<br>LO#/sx<br>lake, 5#/s | 10<br>x  |
| hereby certify that the information above SIGNATURE Type or print name Pats This space for State Gapta State Control of the co | - Cluzs/m<br>sy Clugston   | est of   | E Sr. Regulatory/  | Proration Cle  | ephone No.                               | 505-599-                           | 3454     |
|  |  |  | MANA GAR S BAR :   | NATING NO  |  | OT 18                              | ՀՍՍԱ     |
| APPROVED BY  |  | _ TIT  | LĘ   |  | _ DATE                                   |                                    |          |

APPROVED BY\_\_\_\_\_\_Conditions of approval, if any: