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CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico

Form C-103

District Office	Energy, Minerals and Natural Resources Department		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88240 DISTRICT II	OIL CONSERVATION DIVISION P.O. Box 20° 9 Santa Fe, New Mexica 97504-2088		WELL API NO. 30-025-26432
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS			B-2148
(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.)			7. Lease Name or Unit Agreement Name LEAMEX
1. Type of Well: OIL WELL X GAS WELL	OTHER		
2. Name of Operator Phillips Petroleum Comp	any		8. Well No. 24
3. Address of Operator 4001 Penbrook Street, 0	Massa TY 70762		9. Pool name or Wildcat
4. Well Location	dessa, IX /9/62		LEAMEX (WOLFCAMP)
Section 21	10. Elevation (Show whether	er DF, RKB, RT, GR, etc. 4191.4	
MOTICE OF IN	propriate Box to Indicate		
NOTICE OF IN	NTENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING			
•		CASING TEST AND CEN	
OTHER:		OTHER: ADD PERF	S. AND ACIDIZE X
2/1/95 RU DDU. PULL ROI W/SCRAPER. 2/2/95 PERF. WOLFCAMP I SHOTS). WIH W/5-1/2" 2/3/95 UNSEAT PKR. & PIC TO 10450' & SET. ACIE 2/4/95 TREAT WOLFC. PER 2/5/95 SWAB. RESET PKR. 2/6/95 SWAB.	FORMATION THROUGH 5-1/2 RBP & PKR. ON 2-3/8" T CKLE TBG. W/500 GAL. 15 DIZED WLFC. PERFS 10482 RFS 10198-10204' W/600 (AT 9900'. TREAT WLFC.	5-1/2" CSG. SC " CSG 9946-9950 BG. TO 10510'. % NEFE HCL ACID -10488' W/600 G GAL. 20% NEFE HO 9946-9950' W/400	O GAL. 20% NEFE HCL ACID. SION.
2/7/95 POOH W/ RBP, PKR 3/31/95 PRODUCED 6 BO, 1	1. & IBG. WIH W/ 2-3/8" 15 BW & 5 MCFG IN 24 HO	PROD. TBG. SN / URS. COMPLETE (AT 10487'. POP. DROP FROM REPORT.
I hereby certify that the information above is tru	to and complete to the heat of my knowledge.	and halise	
SIGNATURE . M. Ja		REGULATION SPE	CIALIST DATE 5-11-95
TYPE OR PRINT NAME M SANDERS			
(This space for State Line)			TELEPHONE NO.915/368-1488
ORIGINAL SI	GNED BY JERRY SEXTON HICT I SUPERVISOR		114 13 103
CONDITIONS OF ARREST	TITLE		DATE