

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.  
30-025-26432

5. Indicate Type of Lease  
STATE  FEE

6. State Oil & Gas Lease No.  
B-2148

7. Lease Name or Unit Agreement Name

Leamex

8. Well No.  
24

9. Pool name or Wildcat  
Leamex (Wolfcamp)

**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  GAS WELL  OTHER

2. Name of Operator  
Phillips Petroleum Company

3. Address of Operator  
4001 Penbrook Street, Odessa, Texas 79762

4. Well Location  
Unit Letter C : 560 Feet From The North Line and 1980 Feet From The West Line

Section 21 Township 17-S Range 33-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
4191.4' GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER:

PLUG AND ABANDON   
CHANGE PLANS

SUBSEQUENT REPORT OF:

REMEDIAL WORK   
COMMENCE DRILLING OPNS.   
CASING TEST AND CEMENT JOB   
OTHER:

ALTERING CASING   
PLUG AND ABANDONMENT

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.

03-06-91: COOH w/rods & pump. Install BOP.  
03-07-91: GIH w/1 jt. tail pipe, Halliburton RFC#3 Fluid Control Valve & 5-1/2" RTTS pkr on 2-3/8" tbg to 10,530'. Pump 10 bbls 2% KCL w/5 gals TW-425. Pump 4 bbls 2% KCL w/2 bbls TC-405.  
03-08-91: Pump 1000 gals 20% NEFe acid 2/5% TW-425. Pump 1 drum Unichem TH-756.  
03-12-91: Remove BOP; NU wellhead.  
03-19-91: Pumped 24 hrs. Rec. 9 oil, 6 wtr, 45 gas, GOR 5000:1, Oil Grav. 39.9. Job complete.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE L. M. Sanders TITLE Reg. & Proration Supv. DATE 03-19-91

TYPE OR PRINT NAME L. M. Sanders

TELEPHONE NO. 368-1387

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

MAR 21 1991