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

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

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

OIL CONSERVATION DIVISION

WELL API NO. P.O. Box 2088 30-025-20714 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease STATE FEE L

6. State Oil & Gas Lease No. A-1320 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Vacuum Glorieta East Unit 1. Type of Well: Tract 1 WELL X 8. Well No. 2. Name of Operator Phillips Petroleum Company 9. Pool name or Wildcat 3. Address of Operator Vacuum Glorieta 4001 Penbrook Street, Odessa, TX 79762 Line and 330 2310 Feet From The East South Feet From The Line Township 17-S 35-E Lea County **NMPM** 10. Elevation (Show whether DF, RKB, RT, GR, etc.) origine Boy to Indicate Nature of Notice Report or Other Data

11.	Check Appropriate Box to interest it attack of itodaes, respect, or other batter					
NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING				CASING TEST AND CEMENT JOI		
OTHER:				OTHER: Ran Casing In	tegrity Test	X

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.

09-15-94 - RU DDU. COOH w/prod. equip. GIH w/pkr. and set at 5968'.

09-16-94 - Run Casing Integrity Test to 500#. Held O.K. COOH w/pkr. GIH w/2-3/8" tubing. SN set at 6160'. Anchor set at 5843'. GIH w/pump and rods. Hang well on. Start pumping. RD MO DDU.

I hereby certify that the information above is arus and complete to the best of my knowledge and belief. Supv.Regulatory Affairs DATE 09-19-94 SIGNATURE ((915)TELEPHONE NO. 368-1488 L. M. Sanders TYPE OR FRINT NAME

(This space for State Use)

SEP 23 1994

- DATE -

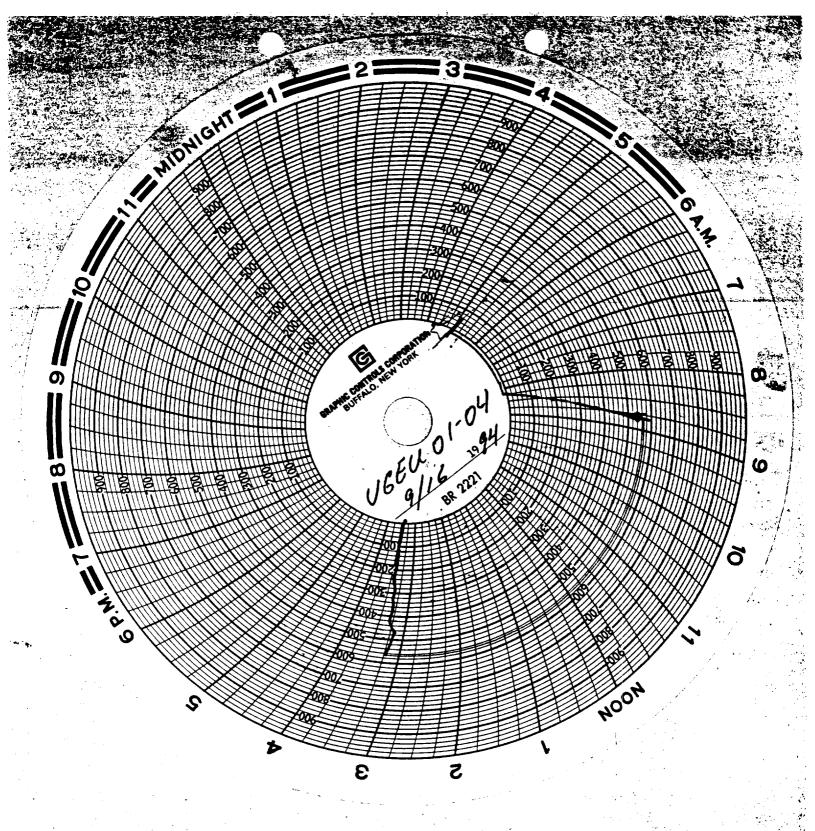
CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY-

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SEF 27 1994

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