| Office Office Appropriate District   |   | ew Mexico                            | Form C   | -103 |
|--|---|--------------------------------------|--|------|
| District I   | Energy, Minerals and  | d Natural Resources                  | Revised March 25,  |      |
| 1625 N. French Dr., Hobbs, NM 87240  |   |                                      | WELL API NO.   | -177 |
| District II<br>811 South First, Artesia, NM 87210  | OIL CONSERVA  | 30-025-20749                         |  |      |
| District III 2040 South Pacheco  |   |                                      | 5. Indicate Type of Lease  |      |
| 1000 Rio Brazos Rd., Aztec, NM 87410   |   | NM 87505                             | STATE X FEE  |      |
| District IV<br>2040 South Pacheco, Santa Fe, NM 87505  |   | 11112 07505                          |  |      |
|  |   |                                      | 6. State Oil & Gas Lease No. B-1713-1  |      |
| DIFFERENT RESERVOIR. USE "APPLIC<br>PROPOSALS.)  | ES AND REPORTS OF<br>SALS TO DRILL OR TO DE<br>ATION FOR PERMIT" (FOR | EDENIAD DI LIA GARAKTA A             | 7. Lease Name or Unit Agreement Name  VACUUM GLORIETA EAST UNIT                      | ::   |
| 1. Type of Well: Oil Well X Gas Well   | Other   |                                      | TRACT 23   |      |
| 2. Name of Operator  |   |                                      | 8. Well No.  |      |
| Phillips Petroleum Company   |   |                                      |  |      |
| 3. Address of Operator   |   |                                      | 9. Pool name or Wildcat  |      |
| 4001 Penbrook Street Odessa, TX 79762  |   |                                      |  | - 1  |
| 4. Well Location   |   |                                      | VACUUM GLORIETA  |      |
| Unit Letter K : 2  Section 31  | Township 17   | <del></del>                          | NMPM County  | line |
|  | 10. Dievation (bhow wh  | 3988 RKB                             | c.)  |      |
| 11. Check A  | propriate Boy to Ind  | Joota Natura - CNI-4                 |  |      |
| NOTICE OF INTE   | NTION TO  | licate Nature of Notice,             |  |      |
| NOTICE OF INTE   |   | SUB                                  | SEQUENT REPORT OF:   |      |
| PERFORM REMEDIAL WORK  | PLUG AND ABANDON  | REMEDIAL WORK                        | ☐ ALTERING CASING  | ٢    |
| TEMPORARILY ABANDON  | CHANGE PLANS  | COMMENCE DRILLI                      |  | ١.   |
| PULL OR ALTER CASING   | MULTIPLE<br>COMPLETION  | CASING TEST AND CEMENT JOB           | ABANDONMENT  | _    |
| OTHER:   |   | OTHER: ON 5 PERCE                    |  | _    |
| <ol> <li>Describe Proposed or Completed<br/>of starting any proposed work). S<br/>or recompilation.</li> </ol> | Operations (Clearly state<br>EE RULE 1103. For Mu                     | all pertinent details and ::         | ve pertinent dates, including estimated date wellbore diagram of proposed completion |      |
| & 1% CORROS INHI   | Z DRL CIBP W/190 JTS<br>B PRESS TSTD CIBP & 0<br>O PSI 30 MIN OK COOH | TRC BY CITY to Vert I Come           | ING 10 SIDS.<br>58' CIRC W/110 BBL FW  |      |
| REQUEST  | 5 YEAR T.A. STATUS FO   | OR WELL.                             |  |      |
|  |   | This Approval of<br>Abandonment Expi | res 6/4/06   |      |
| I hereby certify that the information above is   | true and complete to the time   | ot of much and the                   |  | _    |
| Solution and internation above is  | inde and complete to the bes  | st of my knowledge and belief.       |  | _    |
| SIGNATURE THE San  | der 1   | TITLE SUPERVISOR, REG.               | /PRORATION DATE 5-29-01  |      |
| Type or print name L. M. SANDERS   |   |                                      |  | _    |
| (This space for State use)   |   |                                      | Telephone No. 915/161-1488   | _    |
| ·  |   |                                      | Office of a second   |      |
| APPROVED BY  | <u> </u>  | TITLE CONE                           | 787<br>DATE:   |      |
| Conditions of approval, if any:  |   | GALY WINK                            | DATE   | _    |

