## State of New Mexico

Submit 3 Copies Form C-103 Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 OIL CONSERVATION DIVISION DISTRICT WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-015-26732 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease RECEIVED STATE FEE L DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas Lease No. SEP 2 9 1992 E-10083 SUNDRY NOTICES AND REPORTS ON WELLS O. C. D. ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TILLIE BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Royal A WELL WELL X OTHER 2. Name of Operator & Well No. Phillips Petroleum Company 3. Address of Operator 9. Pool same or Wildcat 4001 Penbrook Street, Odessa, Texas 79762 Undesignated (Atoka) Well Location Unit Letter H: 1980 Feet Prom The North Line and 660 East Feet From The Line Towaship 20-S Range 25-E Eddy Section 16 **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3451' GL; 3463' KB Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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 JOB OTHER: OTHER: Set CIBP & temporary abandon 12. Describe Proposed or Completed Operations (Clearly state all persinent details, and give pertinent dates, including estimated date of starting any proposed..... work) SEE RULE 1103. 9-4-92: RU & pump 30 bbls 2% KCl FW. ND wellhead & NU BOP. Release pkr & POOH w/2-7/8" tbg. GIH w/CIBP on 2-7/8" tbg & set 8937' RKB. Circ. hole w/212 BBO 2% KCl FW w/KW137 & test csq & CIBP to 500 psi - OK. POOH & LD 272 jts 2-7/8" N-80 workstring. ND BOP & NU wellhead & 9-5-92: temporary abandoned until further evaluation. I hereby certify that the information above is to to the best of my knowledge and belief. Supervisor, Req. Affairs 9/28/92 915/

TITLE

L. M. Sanders TYPE OR PRINT NAME

TELEPHONE NO. 368-1488

(This space for State Use)

SUPERVISOR, DISTRICT H

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