Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

CONDITIONS OF APPROVAL, IF ANY:

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

DISTRICT II

Form C-103 Revised 1-1-89 OIL CONSERVATION DIVISION
P.O. Box 2088
Stanta Fa Naw Marion 87504,2088 WELL API NO. 30-015-24454

P.O. Drawer DD, Artesia, NM	89310	Santa re, New Mexico 87504-2088			30 013 24434		
	●0710				5. Indicate Type of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aziec, N	M 27410	. 1040			STATE FEE X		
					6. State Oil & G	as Lease No.	
SIIND	DV NOTIC	EC AND DEDODES O	A 1 1 1 5 1 1 5		NA WWW.	<i>,,,,,,,,,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,	
( DO NOT USE THIS FORM	M FOR PROP	ES AND REPORTS O	WELLS	DI 110 DAOY 70 4			
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"					7. Lease Name o	r Unit Agreement Name	
	(FORM C-10	01) FOR SUCH PROPOSAL	.S.)			•	
1. Type of Well:					- D		
WELL	MET X	OTHER			Drag C		
2. Name of Operator		/			8. Well No.	<del></del>	
Phillips Petr	oleum C	ompany ,			2. WELL NO.		
3. Address of Operator			·····		9. Pool name or	Wildow	
4001 Penbrook	Street	, Odessa, Texas	s 79762		i	·	
4. Men Pocation						lsbad Bone Spr	inq
Unit LetterO	_ : <u>990</u> _	Feet From The South	n	Line and 1980	) For F	- East	
					reat Prof	n the Labe	Line
Section 19		Township 23-S	Range	27-E	NMPM Eddy	,	
///////////////////////////////////////		Towaship 23-S 10. Elevation (Show	whether DF, I	KB, RT, GR, etc.)	MARINE EUCLY	_ <del>\////////////////////////////////////</del>	County
		3210' KB;	3198' (	GL			
11.	Check Ar	propriate Box to Ind	icate Nati	re of Notice E	Concert on Out		
NOTICE	OF INTE	NTION TO:	1				
NOTICE OF INTENTION TO:					SEQUENT F	REPORT OF:	
PERFORM REMEDIAL WORK	<b>、</b>	PLUG AND ABANDON	RE	MEDIAL WORK		A1	_
EMPORARILY ABANDON				WEDDIE HOLK		ALTERING CASING	L
CIM OUNDIE! VOYUTON		CHANGE PLANS	co	MMENCE DRILLING	GOPNS.	PLUG AND ABANDO	NMENT -
PULL OR ALTER CASING				SING TEST AND O	51451# 10= T		
OTHER:							
/INER.			от	HER: Test &	check prod	equip for g	as X
12. Describe Proposed or Compi	leted Operation	4 (Clearly state off postions de		line con	nection.		
12. Describe Proposed or Compliwork) SEE RULE 1103.	оронали	o (Olour), since an periodest of	naur, ana give	r pertinent dates, inclu	ding estimated date of	starting any proposed	
6/25/92: MI RU	John W	act Eng Heale	33				
Check	א וווסט	est Eng. Hook	nb mell	to flare	pit and st	ock tanks.	
21.00%	<b>ULL 112</b>	euuib. Openin	מעד תנו ח	1   Milter i wa	- <b></b>		si
	TIOM	CHILL 0/04 CHOK	e. One	י מנו ו בעל מי	thana brace.		
Dack (	nru tes	st equip. and s	tock ta	nk. Well:	flowing thr	u 8/64 choke	
	psi -				_	•	
Choke		15/64					
Gas MC	.г -	400.00					
Sid down all too	+						
Rig down all tes	c equip	ment, shut wel.	l in at	700 psi or	n tubing, p	ending furth	ner
varaucion.						-	
H2S reading 800	Dirom'						
<del></del>		·					
I hereby certify that the information a	above is true and	complete to the best of my knowled	dge and belief.				
SIGNATURE	2 X~		Sı	merujcor	Dog . n	<i>-</i>	
	<del>"67</del>	non	- TILE - 31	ADELAISOL'	rey & Pro.	6/30/92	
TYPE OR PRINT NAME L. M	. Sande	rs					
						TELEPHONE NO. 368	<del>-1488</del>
(This space for State Use)	OBIGIN.	AL SIGNED EY					
		ILLIANIS					
VTROVED BY		TOR DISTRICT II	_ mrs			1111 6 %	1000
CONDITIONS OF A PROVINCE TO THE	17571 S 113	OA, DIO INIOLIT				— DATE	<del>- 1992 -</del>