

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 Brancos Rd., Aztec, NM 87410

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

WELL API NO.
30-015-25768

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
K-3271

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.)

7. Lease Name or Unit Agreement Name

James A

1. Type of Well:

OIL WELL ☒ GAS WELL ☐

OTHER

MAR 27 1992

2. Name of Operator

Phillips Petroleum Company

O. C. D.

ARTESIA OFFICE

8. Well No.
4

3. Address of Operator

4001 Penbrook Street, Odessa, Texas 79762

9. Pool name or Wildcat
Cabin Lake (Delaware)

4. Well Location

Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line

Section 2 Township 22-S Range 30-E NMPM Eddy County

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

3182' GL - 3193' DF

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Return to production ☒

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.

3-16-92: GIH w/2-7/8" production tubing & LOK-set packer. Setting nipple @ 6250' & packer @ 5475'. GIH w/rods and pump.

3-22-92: GIH, pump 25 BO, 403 Bbls water in 24 hours. Complete drop from report.

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

SIGNATURE

Supervisor Reg/Proration 3/25/92

TYPE OR PRINT NAME

L. M. Sanders

TELEPHONE NO. 368-1488

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR DISTRICT II

APPROVED BY

TITLE

DATE

MAR 30 1992

CONDITIONS OF APPROVAL, IF ANY: