Submit 3 Copies To Appropriate District	State of Nev			Form C-103
Office District I	Energy, Minerals and I	Natural Resources	TYPELL ADVANCE	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONGERNAL		WELL API NO. 30-045-30979	
811 South First, Artesia, NM 87210	OIL CONSERVAT		5. Indicate Type of Lease	
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505			STATE X FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lease No.	
			E-1204-3	
SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	ES AND REPORTS ON SALS TO DRILL OR TO DEE ATION FOR PERMIT" (FORM	PEN OR PLUG BACK TO A	7. Lease Name o	r Unit Agreement Name:
1. Type of Well: Oil Well Gas Well X	Other Company		San Juan 32-8 Unit 009261	
2. Name of Operator			8. Well No.	
Phillips Petroleum Company	017654		SJ 32-8 Unit #28A	
3. Address of Operator		9. Pool name or Wildcat		
5525 Highway 64, NBU 3004, Farmington, NM 87401 Blanco Mesaverde 72319				
Unit Letter J : 1	1663' feet from the	South line and	2004' feet fr	om the East line
		ine and	Z004 leet ir	om the <u>East</u> line
Section 16	Township 311		NMPM	County San Juan
	10. Elevation (Show whe	ether DR, RKB, RT, GR, et 6567' GL	c.)	
11. Check A	ppropriate Box to Ind	icate Nature of Notice,	Report, or Oth	er Data
NOTICE OF INTE			SEQUENT RE	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	ING OPNS.	
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB		ABANDONMENT
OTHER:		OTHER:		
12. Describe Proposed or Completed	Onerations (Clearly state		ve nertinent dates	including estimated data
of starting any proposed work). or recompilation.				
CHANGE IN SURFACE CASING S	SETTING DEPTH.			
While visiting with the OC is set between 3000' and 5 wish to change our surface	5000' the minimum requ	irement for the surface		
				v*
I hereby certify that the information above i	s true and complete to the be	st of my knowledge and belief	•	
SIGNATURE Falsey	lugst	TITLE Sr. Regulatory	Clerk	DATE10/24/02
Type or print name Patsy	Clugston		Telepl	hone No. 505-599-3454
(This space for State use)	AND EXPERIENCE	TITLE	APPLIE INC.	. "OCT 2 8 2002
APPROVED BY Conditions of approval, if any:	·	TITLE	Establish Maria	DATE