State of New Mexico Submit 3 Copies Form C-103 to Appropriate District Office Ener\_\_\_Minerals and Natural Resources Department **Revised 1-1-89** OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-01849 **DISTRICT II** Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE L DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas Lease No. E-1027 SUNDRY NOTICES AND REPORTS ON WELLS ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG 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: Ranger GAS WELL WELL OTHER SWD 2. Name of Operator 1. Well No. Phillips Petroleum Company 3. Address of Operator 9. Pool same or Wildcat 50710 4001 Penbrook St., Odessa, Texas 79762 Ranger Lake Bough 4. Well Location Unit Letter N: 1978 Feet From The West 660 Line and Foot From The 23 Section Township Range 34-E **NMPM** Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4147' GR; 4159' RKB 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: Acidized  $\mathbf{x}$ 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. 9/20/94 RU and acidized with 3000 gals 28% HCL. RD MO place well back on at 500-600 bbls/day at 2650#.

I hereby cartify that the information above is true and complete to the best of my knowled	ge and belief.	
SIGNATURE MUSIC MANGO	me Supv., Reg. Affairs	DATE 9/20/94
TYPE CRIMINAL L. M. Sanders		TELETHONE NO. 915/368-1488
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		
APPROVED BY	- mus	DATE SEP 2 2 1994

CONDITIONS OF APPROVAL, IF ANY: