

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 Brazos Rd., Aztec, NM 87410

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

WELL API NO.  
30-025-31680

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
B9642

**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

Chem State

1. Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator  
Phillips Petroleum Company

8. Well No.  
8

3. Address of Operator  
4001 Penbrook Street, Odessa, TX 79762

9. Pool name or Wildcat  
Tulk (Wolfcamp)

4. Well Location  
Unit Letter 0 : 1150 Feet From The South Line and 1450 Feet From The East Line  
Section 4 Township 15-S Range 32-E NMPM Lea County

10. Elevation (Show whether DP, RKB, RT, GR, etc.)  
4310.7' GR (Unprepared)

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: Extension on permit to drill ☒

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

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.

Phillips Petroleum Company requests the permit to drill the Chem State Well No. 8 to be extended for one year (drilling permit issued 11-23-92). All aspects of application, including the casing program, hole size, weight per foot, setting depth and quantity of cement will remain as stated on original APD.

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

SIGNATURE

*L. M. Sanders*

TITLE

Supv. Regulatory Affairs

DATE

04-27-93

TYPE OR PRINT NAME

L. M. Sanders

(915)

TELEPHONE NO. 368-1488

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

APR 30 1993

CONDITIONS OF APPROVAL, IF ANY:

*Expires 11-23-93*