Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised March 25, 1999 District 1 1625 N. French Dr., Hobbs, NM 87240 WELL API NO. District II 30-025-01516 OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III 1900 Rio Brazos Rd., Aztec, NM 87410 STATE X Santa Fe, NM 87505 FEE \square District IV 2040 South Pacheco, Santa Fe, NM 87505 6. State Oil & Gas Lease No. B-2148 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) **LEAMEX** 1. Type of Well: Oil Well X Gas Well Other 2. Name of Operator 8. Well No. Phillips Petroleum Company 3. Address of Operator 9. Pool name or Wildcat 4001 Penbrook Street Odessa, TX 79762 LEAMEX (PENN) 4. Well Location Unit Letter 1980 feet from the NORTH line and 1976 feet from the line Section 23 Township 17-S Range 33-E **NMPM** County LEA 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4137 GL, 4148 DF 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 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 MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER: PERFORM STEP RATE TEST [X]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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. PER ATTACHED PROCEDURE & WELL BORE SCHEMATIC, PHILLIPS WISHES TO PERFORM A PRESSURE STEP RATE TEST IN THE GRAYBURG FORMATION. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE SUPV. REGULATION/PROPATION 02/19/01 DATE -915/368-1667 Type or print name L. M. SANDERS Telephone No. 915/368-1488 (This space for State use) APPROVED BY_ TITLE DATE

\(\) Conditions of approval, if any: