State of New Mexico Energy, Minerals and Natural Resources

Form C-103 Revised March 25, 1999 WELL API NO.

1625 N. French Dr., Hobbs, NM 8/240 District II				30-025-03047			
811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION 2040 South Pacheco			5. Indicate Type of Lease			
District III 1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NN	STA	STATE X FEE				
District IV	,			6. State Oil & Gas Lease No.			
2040 South Pacheco, Santa Fe, NM 87505				B-1713			
SUNDRY NOTICI (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC.	ES AND REPORTS ON V SALS TO DRILL OR TO DEEP ATION FOR PERMIT" (FORM (EN OR PLUG BACK TO A	7. Lease N	lame or Unit Agr	reement Name:		
PROPOSALS.)		,	VACUUM AE	30 UNIT			
1. Type of Well: Oil Well 🔽 Gas Well 🗆 Other							
Oil Well X Gas Well 2. Name of Operator	Other		8. Well No	<u> </u>		\dashv	
•				06			
Phillips Petroleum Company 3. Address of Operator				9. Pool name or Wildcat			
4001 Penbrook Street Odessa, TX 79762				VACUUM ABO REEF			
4. Well Location							
Unit Letter A:	feet from the	NORTH line and	660	feet from the	EAST lin	ne	
Section 4	Township 18-S		NMPM	LEA Count	ty		
		GR, 3950' RKB					
11. Check A	ppropriate Box to Indic	cate _l Nature of Notic	e, Report, oi	r Other Data			
NOTICE OF INTENTION TO: SUB				SEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	(ALTE	RING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LING OPNS.	PLUG ABAN	AND IDONMENT		
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AN CEMENT JOB	D				
OTHER:		OTHER: ROOM CSG	: INTEGRITY	TST - REQUEST	TA STATUS	X	
12. Describe Proposed or Completed of starting any proposed work). So or recompilation.	SEE RULE 1103. For Mult						
03/19/94 CIBP WAS SET @	8420'.						
• •	EGRITY TEST (CHART ATT BY E. GONZALES OF OCD		NISH 530 (P	ASSED)			
request 5 year	T.A. STATUS FOR WELL.						
		inis Appro Abandonmen	val of Ter t Expires	mp orary 3	23/06		
hereby certify that the information above	is true and complete to the bes	st of my knowledge and be	lief.			_	
IGNATURE S.M.	Janles 1	TITLE SUPERVISOR RE	GL/PROR	DATE _	03/19/01		
ype or print name L. M. SANDERS				Telephone No.	915-368-148	8	
This space for State use)						_	
APPROVED BY		TITLĘ		DATE			
Conditions of approval if any		 					