

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 811 South First, Artesia, NM 87210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

WELL API NO. 30-025-26432
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-2148
7. Lease Name or Unit Agreement Name: LEAMEX
8. Well No. 24
9. Pool name or Wildcat LEAMEX (WOLFCAMP)
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4191.4 GR

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.)

1. Type of Well:
 Oil Well Gas Well Other

2. Name of Operator
Phillips Petroleum Company

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

4. Well Location
 Unit Letter **C** : **560** feet from the **NORTH** line and **1980** feet from the **WEST** line
 Section **21** Township **17S** Range **33E** NMPM County **LEA**

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
4191.4 GR

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 MULTIPLE COMPLETION

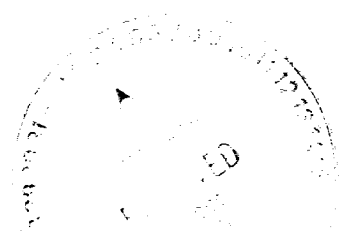
SUBSEQUENT REPORT OF:

- REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
 CASING TEST AND CEMENT JOB

OTHER: OTHER: **REACTIVATE**

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.

12/01 - WELL REACTIVATED FROM SHUT-IN STATUS.
 12/09/01 - 24 HOUR TEST (5.0 BOPD, 11 BWPD & 16 MCFPD).



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

SIGNATURE *L. M. Sanders* TITLE SUPERVISOR, REGULATION/PROR. DATE 01/02/02

Type or print name L. M. SANDERS Telephone No. (915) 368-1488

(This space for State use)

APPROVED BY _____ TITLE PAUL E. KRELL DATE FEB 04 2002
 Conditions of approval, if any: PETROLEUM ENGINEER

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