

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. 30-025-02220
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-2317
7. Lease Name or Unit Agreement Name M. E. Hale
8. Well No. 2
9. Pool name or Wildcat Vacuum Gb/SA
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4029.6 RKB

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 St., Odessa, TX 79762

4. Well Location
Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line
Section 35 Township 17-S Range 34-E NMPM Lea County

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: ☐

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.

5-7-90: RU DDU. COOH w/rods and tbq. Unit & rods to be used on Hale #12.
GIH w/new sub, 60 HP motor, seal, separator & 135 stg W-18 400 pump. RD MO DDU.
Pmpg fr 4-1/2" csg & perfs 4412'-4602'.
Temporary drop.
6-6-90: Fluid level 3965'. Daily rec: 24 BO, 619 BW & 11 MCF gas.
Job complete.

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

SIGNATURE J. L. Maples TITLE Assist., Reg. & Pro. DATE 6/25/90
TYPE OR PRINT NAME J. L. Maples TELEPHONE NO. 367-1411

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: