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 Office | | |
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| D O D 1000 TI 11 - ND 4 000 40 | ATION DIVISION Box 2088 | WELL API NO. |
| | Mexico 87504-2088 | 30-025-02834 5. Indicate Type of Lease |
| DISTRICT III 1000 Rio Brazos Rd., Azioc, NM 87410 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.) | | 6. State Oil & Gas Lease No. |
| | | B-1398 |
| | | 7. Lease Name or Unit Agreement Name EAST VACUU GB/SA UNIT |
| I. Type of Well: OIL GAS WELL WELL OTHER | | TRACT 1912 |
| 2. Name of Operator Dhilling Bot moloum Company | | 8. Well No. 002 |
| Phillips Petroleum Company 3. Address of Operator | | 9. Pool name or Wildcat |
| 4. Well Location | | VACUUM GRAYBURG/SAN ANDRES |
| | OUTH Line and 3 | 30 Feet From The EAST Line |
| Section 19 Township 17-S | Range 35-E | NMPM LEA County |
| 10. Elevation (Short | w whether DF, RKB, RT, GR, et 3984' GL | £.) |
| 11. Check Appropriate Box to Ind | · · · · · · · · · · · · · · · · · · · | 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 | |
| PULL OR ALTER CASING | CASING TEST AND C | |
| OTHER: | OTHER: | |
| 12. Describe Proposed or Completed Operations (Clearly state all pertise work) SEE RULE 1103. | nent details, and give pertinent de | ates, including estimated date of starting any proposed |
| TAG TOP OF RODS @ 3702', SECURE | WELL, SDON. | BOPE, COOH W/TBG, PU 5.5" PKR, GI |
| 07/08/95 ESTABLISH PUMP IN RATE OF 1.5 B UNDER PKR SET @ 3574'. NOTE: PUMP PLUG #1, 125 SXS, INTERVAL | BPB ● 1750#, RECEIVE All cement plugs cl | ASS "C", 14.8 PPG, 1.32 CFPS, |
| DISPLACEMENT PRESSURE OF 2200#, 07/10/95 RELEASE PKR, CIRCULATE WELL W/9 0F PLUG #1 @ 3618', TOC O.K.'ED | SI TBG PRESSURE 18 0.5# GELLED BRINE, S 0 BY NMOCD, PERF FOR | 850#, SDFW. SET PKR @ 2828', RU WL TAG TOP |
| SXS, LD PKR TIH TO 3074', PUMP | PLUG #2, 30 SXS, IN | ITEVAL 3125'-2835', ADDED .03% |
| CACĹ, COOH, GIH W/PKR, SÉT 0 15 50 SXS, INTERVAL 1700'- 1600', | | |
| I hereby certify that the information above is true and complete to the best of my | knowledge and belief. | |
| SIGNATURE J. M. Minders | TITLE REGULATION S | PECIALIST PATE 07/24/95 |
| TYPE OR PRINT NAME M SANDERS | | TELEPHONE NO.915/368-1488 |
| (This space for State Use) | | STREETENCH OR AUG 09 1995 |
| APPROVED BY TOWN AND STATE OF APPROVAL OF APPROVAL OF APPROVAL OF APPROVAL OF ANY: | TITLE | DATE |
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