

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. 30-025-02857
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-2735
7. Lease Name or Unit Agreement Name EAST VACUUM GB/SA UNIT TRACT 2271
8. Well No. 001
9. Pool name or Wildcat VACUUM GB/SA

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator Phillips Petroleum Company	
3. Address of Operator 4001 Penbrook Street, Odessa, TX 79762	
4. Well Location Unit Letter 0 : 560 Feet From The SOUTH Line and 1980 Feet From The EAST Line Section 22 Township 17 S Range 35 E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3933' 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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: **SWAB TESTED** ☒

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.

09/07/94 MIRU DDU. COOH LD RODS AND PUMP. NU BOP AND COOH W/TBG.
09/08/94 GIH W/PKR. SET PKR @ 4200'. RU SWAB.
09/09/94 SWABBED.
09/12/94 SWABBED. UNSET PKR COOH LD PKR. GIH W/2-3/8" TUBING 4200'. ND BOP. FLANGE UP WELLHEAD.
09/14/94 PICK UP AND RUN PUMP AND RODS. LOAD AND TEST TBG TO 500#. TEST OK. RDMO.
02/09/95 TEST 24 HRS. 9 BOPD, 16 BWPD, AND .3 MCF.

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, REG. AFFAIRS** DATE **02/20/95**

TYPE OR PRINT NAME **L. M. SANDERS** TELEPHONE NO. **915/368-1488**

(This space for State Use)

ORIGINAL SIGNED BY
GARY WINK
FIELD REP. II

APPROVED BY _____ TITLE _____ DATE **FEB 23 1995**

CONDITIONS OF APPROVAL, IF ANY: