

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

|   |  |   |
|---|--|---|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)   |  | WELL API NO.<br>30-025-02870  |
| 1. Type of Well:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>   |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>Phillips Petroleum Company   |  | 6. State Oil & Gas Lease No.<br>B-960   |
| 3. Address of Operator<br>4001 Penbrook St., Odessa, Texas 79762  |  | 7. Lease Name or Unit Agreement Name<br>Vacuum Abo Unit<br>Btry 4, Tr. 6                            |
| 4. Well Location<br>Unit Letter <u>D</u> : <u>990</u> Feet From The <u>North</u> Line and <u>333</u> Feet From The <u>West</u> Line<br>Section <u>25</u> Township <u>17-S</u> Range <u>35-E</u> NMPM Lea County |  | 8. Well No.<br>75   |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>3928' RKB   |  | 9. Pool name or Wildcat<br>Vacuum Abo Reef  |

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO:                        |   | SUBSEQUENT REPORT OF:   |   |
|--|---|---|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                                    | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>                          | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  |   | CASING TEST AND CEMENT JOB <input type="checkbox"/>                       |   |
| OTHER: <input type="checkbox"/>                |   | OTHER: Filed to correct formation top <input checked="" type="checkbox"/> |   |

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.

C-103 form filed to correct formation top for the Abo from 8688' to 8548'.

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

SIGNATURE [Signature] TITLE Supv., Reg. & Pror. DATE 3/24/92

TYPE OR PRINT NAME L. M. Sanders TELEPHONE NO. 915/368-1665

(This space for State Use)

Orig. Signed by Paul Kautz  
Geologist

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

MAR 26