Submit 3 Copies To Appropriate District Office District 1	State of New Mo	Form C-103 Revised March 25, 1999					
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONCEDIVATIO	WELL API NO. 30-025-02873					
811 South First, Artesia, NM 87210 District III	OIL CONSERVATION 2040 South Pac	5. Indicate Type of Lease					
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 8	STATE X FEE					
2040 South Pacheco, Santa Fe, NM 87505			6. State Oil B-1399-1	& Gas Lease	No.		
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:			7. Lease Name or Unit Agreement Name:  EAST VACUUM GB/SA UNIT TRACT 2614				
Oil Well Gas Well Other PLUG AND ABANDON  2. Name of Operator			8. Well No.				
Phillips Petroleum Company			001				
3. Address of Operator			9. Pool name or Wildcat				
4. Well Location			VACUUM GRAYBURG/SAN ANDRES				
	2310 feet from the SOL	JTH line and	2310 f	eet from the	EAST	line	
Section 26	Township 17S	Range 35E	NMPM	Cour	ıtv LI	EA	
	10. Elevation (Show whether		c.)				
11 Check A		98' GR	Report or i	Mher Data	\$\$\$\$\$\$\$\$\$\$\$		
11. Check Appropriate Box to Indicate Nature of Notice, F NOTICE OF INTENTION TO:  SUBS				SEQUENT REPORT OF:			
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK			02402		RING CAS	ing	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLI	NG OPNS.		3 AND		
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB	ABANDONMENT D				
OTHER:		OTHER:					
06-02-01 Mix mud & circul 06-04-01 Cut 4" liner @ 1 06-05-01 Cut 5-1/2 " csg 06-06-01 Pump cement plug 06-06-01 Pump cement plug 06-07-01 Install dry hole *** Location clean & ready	GEE RULE 1103. For Multiple  g #1. Spot 110 sx cmt on @ late hole. 1845'. @ 1757'. g #2. Spot 125 sx cmt @ 18 g #3. Spot 110 sx cmt from e marker.  for inspection ***	Completions: Attach CIBP @ 4480' TO 24 B10', tag plug @ 1: m 405' to surface.	wellbore diag	lates, including	g estimated ed complet	date	
I hereby certify that the information above is		•		u2	C /10 /0	. 4	
SIGNATURE JIII	TITL	<u>E SUPV., REGULATIO</u>	IN/PKUKATION	V DATE_	6/18/0	1	
Type or print name L. M. SANDERS		· · · · · · · · · · · · · · · · · · ·		elephone No.	(915)368	-1488	
(This space for State use) APPROVED BY APPROVED BY Conditions of approval, if any:	Rulinson TITI	COMPLIANCE	OFFINED	DATE ! ]	AN 22	<u> </u>	
The act sex 6/1	18/01 D. J	maer					