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State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs NM 88240 P.O. Box 2088 30-025-02910 Santa Fe. New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE 🗌 DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 **A-1320** SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) EAST VACUUM GB/SA UNIT 1. Type of Well: **TRACT 2801** GAS WELL WELL X OTHER 8. Well No. 2. Name of Operator 009 Phillips Petroleum Company 9. Pool name or Wildcat 3. Address of Operator VACUUM GB/SA 4001 Penbrook Street, Odessa, TX 79762 4. Well Location SOUTH 1992 WEST 660 Feet From The Feet From The Line and Line Unit Letter ship 17-S Range 35-E N 10. Elevation (Show whether DF, RKB, RT, GR, etc.) **NMPM** County Township Section 3945' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: **NOTICE OF INTENTION TO: ALTERING CASING** PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. TEMPORARILY ABANDON CHANGE PLANS CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: CLEANED OUT AND ACIDIZED 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. 09/13/94 MIRU DDU. COOH W/TBG. COOH W/PKR ATTEMPT TO RUN CSG LOG. 09/14/94 RAN HLS ELECTRO-MAGNETIC CASING INSPECTION LOG, TST TO 520#, TAG TD 04602'. 09/15/94 CLEANED OUT FROM 4605' TO 4660'. GIH W/PKR AND TBG. SET PKR 94107'. 09/16/94 ACIDIZED W/3500 GALS 15% HCL ACID. 09/17/94 09/19/94 RU SWAB. UNSET PKR AND COOH. GIH W/2-7/8" TBG, TAC. ND BOP FLANGE UP WELLHEAD. 09/20/94 PU GIH W/PUMP AND RODS. RD MO DDU. 09/21/94 PUMP 24 HRS TEST 114 BOPD 129 BWPD 212.8 MCF. 11/19/94 I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE SUPERVISOR, REG. AFFAIRS DATE 12/06/94 SIGNATURE TELEPHONE NO.915/368-1488 TYPE OR PRINT NAME SANDERS

(This space for State Use)

APPROVED BY

CRIGINAL PERMIT OF BLEKY SEXFOR

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DATE

DEC 0.8 1994

CONDITIONS OF APPROVAL, IF ANY:

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