State of New Mexico

Submit 3 Copies to Appropriate	Energy, Minerals and Natural Re			Revised 1-1-89
to Appropriate District Office DISTRICT I P.O. Pox 1980, Hobbs NM 88240 DISTRICT II P.O. Leawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 8741 SUNDRY NO (DO NOT USE THIS FORM FOR P DIFFERENT RES	OIL CONSERVATIO P.O. Box 208 Santa Fe, New Mexico OTICES AND REPORTS ON WELL ROPOSALS TO DRILL OR TO DEEPEN OF SERVOIR. USE "APPLICATION FOR PERICE-101) FOR SUCH PROPOSALS.)	N DIVISION 88 87504-2088 LS DR PLUG BACK TO A	WELL API NO. 30 5. Indicate Type of E 6. State Oil & Gas Le B-2131 7. Lease Name or Un EAST VACUUM TRACT 2947	Revised 1-1-99 -025-02933 case STATE X FEE pase No.
2. Name of Operator			8. Well No. 050	
Phillips Petroleum Con 3. Address of Operator 4001 Penbrook Street, 4. Well Location Unit Letter H : 19		Line and 66	9. Pool name or Wik VACUUM GB/	SA FAST
20	Township 17 S Ra	inge 35 E	NMPM	LEA County
Section 29	10. Elevation (Show whether	er DF, RKB, RT, GR, etc	.)	
	Annuarieta Pou ta Indianta	3964' GR	Penart or Otl	nor Note
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING OTHER:	PLUG AND ABANDON CHANGE PLANS	REMEDIAL WORK COMMENCE DRILLING CASING TEST AND CE OTHER: TEMPORAR	OPNS. PI	LTERING CASING LUG AND ABANDONMENT X
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. 2/15/95 MIRU DDU. COOH LD RODS. 2/16/95 NU BOP. STRIP OUT OF HOLE W/TUBING. GIH W/ BIT AND SCRAPER TO 4390°. 2/17/95 KILL WELL. TRIP OUT W/SCRAPER. START IN HOLE W/CIBP, WELL STARTED FLOWING. PUMP BRINE TO KILL, WELL FLOWED BACK ALL BRINE PUMPED. 2/20/95 PUMP BRINE TO KILL WELL. GIH W/CIBP. SET 94360°. ND BOP. LOAD AND TEST CSG. TO 500#, LOST 40# IN 5 MIN. COOH LD TUBING. LOAD AND TEST CSG TO 500# FOR 30 MIN. OK COOH W/REST OF TBG. FLANGE UP WELLHEAD. RD MO DDU. LEAVE WELL IN TA STATUS. This Approval of Temporary Abandonment Expires				
I hereby certify that the information above	is true and complete to the best of my knowledge			
SIGNATURE	ander_ m	LE SUPERVISOR,	REG. AFFAIRS	DATE
TYPE OR PRINT NAME MSAN	DERS		TI	ELEPHONE NO.915/368-1488

TITLE .

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT & SUPERVISOR

MR 01 1395 DATE_

APPROVED BY_ CONDITIONS OF APPROVAL, IF ANY:

dr.



