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. 30-025-02937

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. B-2433-12

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.)

7. Lease Name or Unit Agreement Name: EAST VACUUM GB/SA UNIT TRACT 2963

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator: Phillips Petroleum Company

8. Well No. 002

3. Address of Operator: 4001 Penbrook Street, Odessa, TX 79762

9. Pool name or Wildcat: VACUUM GRAYBURG/SAN ANDRES

4. Well Location
Unit Letter N : 1980 Feet From The SOUTH Line and 660 Feet From The WEST Line

Section 29 Township 17 S Range 35 E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3969' GL

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			OTHER: ACIDIZED			[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.

11/18/94 TRIP IN AND OUT W/CSG SCRAPER TO 4304'. MIX 20 BBLS FRESH WATER W/10 GALS TW-425. MIX 5 DRUMS TC-405 W/275 GALS FRESH WATER. PUMP TW-425 MIX. SPOT 1/2 OF TC 405 MIX ON FORMATION
11/21/94 PUMP 3000 GALS 15% FERCHECK ACID.
11/22/94 SWAB.
11/23/94 COOH LD PKR. GIH W/SUB EQUIP. AND TBG. WAIT ON WITNESS TO ND BOP. ND BOP FLANGE UP WELLHEAD. START PUMPING.
12/07/94 TEST 20 BOPD 659 BWPD 357.9 MCF.

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

SIGNATURE [signature] TITLE SUPERVISOR, REG. AFFAIRS DATE 01/13/95

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

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE JAN 19 1995

CONDITIONS OF APPROVAL, IF ANY: