Submit 3 Copies to Appropriate District Office

APPROVED BY____

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office				
DISTRICT I	OIL CONSERVATION DIVISION		WELL API NO.	
P.O. Box 1980, Hobbs NM 88240 P.O. Box 2 DISTRICT II Santa Fe. New Mexic			30-025-02989	
P.O. Drawer DD, Ar sia, NM 88210	Drawer DD, Ar sia, NM 88210		5. Indicate Type of Lease STATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. B-2073	
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	
1. Type of Well:		.,	TRACT 3345	
OIL GAS WELL C	OTHER			
2. Name of Operator Phillips Petroleum Com	pany		8. Well No. 035	
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: 66	O Feet From The SOUTH	Line and19	80 Feet From The WEST Line	
Section 33	Township 17-S Ran		NMPM LEA County	
	10. Elevation (Show whether	FDF, RKB, RT, GR, etc. GL: 3957' RK		
11. Check A	ppropriate Box to Indicate 1			
•	NTENTION TO:	1	SEQUENT REPORT OF:	
DEDECORA DEMEDIAL MODIC	DI LIC AND ADANDON	BEMEDIAL MODIZ	ALTERNO CASINO	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	LI ALTERING CASING LI	
		COMMENCE DRILLING		
		CASING TEST AND CE		
OTHER:		OTHER: PULL SUL	3. ACIDIZE, RETURN SUB	
work) SEE RULE 1103.			tes, including estimated date of starting any proposed	
4/17/95 MIRU LUCKY WEI TAG @ 4721', S	LL SERVICE DDU #31, NU B SISD.	SOPE, COOH W/EL	EC SUB, TRIP SAND PUMP,	
4/18/95 TIH & TOH W/C	SG SCRAPER TO 4100', MIR		PU PKR & TEST TBG & PKR IN HOLE	
			MP 10 BBLS X-LINKED GELLED BRINE	
	MP SCALE CONVERTER, RDMO BG ON VACUUM. RECOVERED		ASED PKR, PULLED UPHOLE 1 JT,	
RESET, LOAD AN	D TEST, O.K. SISD.	-	•	
BREAKER, 1450	🗗 ROCK SALT & 46 BBLS FR	ESH WATER. SI	BBLS X-LINKED GELLED BRINE W/GBW- , RD HES EQPT. RU SWAB,	
OPEN WELL, RECOVERED 140 BBLS W/TRACE OF OIL, SISD 4/21/95 OPEN WELL, RECOVERED 227 BBL W/TRACE OF OIL, RD SWAB, MIRU CHARGER & PUMP SCALE SQZ				
SISD.	OTERED 227 DDE W/TRACE	(OVER)	b, HIRO CHARGER & FORF SCALE SQL	
I hereby certify that the information above is	true and complete to the best of my knowledge	and belief.	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE	anders m	E Regulation S p	ecialist DATE 5/18/95	
TYPE OR PRINT NAME MSANDE	RS	W	TELEPHONE NO.915/368-1488	
(This space for State Use) ORIGINA	L SIGNED BY JERRY SEXTON			
DI	STRICT I SUPERVISOR		MAY 23 1995	
			טא וראי	

_____ TITLE ___

_____ DATE_

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COMPLETE DROP FROM REPORT.
PUMP 24 HRS, TEST 12 BOPD, 587 BWPD, 154.6 MCF 77.3% CO2 PUMP 24 HRS, TEST 12 BOPD, 589 BWPD, 124.6 MCF 77.3% CO2 PUMP 24 HRS, TEST 18 BOPD, 587 BWPD, 194.4 MCF 77.1% CO2
                                                                               96/0E/₹
                                                                               S6/6Z/₹
                                                                               $6/8Z/$
                                                 DOWD 24 HES' NO LEST
                                                                               96/LZ/b
                                                FUMP 24 HRS, NO TEST.
                                                                               $6/9Z/t
                                                PUMP 15 HRS, NO TEST.
    ND BODE, FLANGE UP WELLHEAD, START PUMPING, RDMO DDU,
        KETEYS IDDKK' COOH M\IBC & DKK' CIH M\SNB YSSWBLY,
                                                                               $\\SZ\\p
                                                                 4\54\62 CKEM OEE
                                                                 CKEM OFF
                                                                              4/53/62
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