

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.	30-025-02997
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-2863-1
7. Lease Name or Unit Agreement Name	EAST VACUUM GB/SA UNIT TRACT 3374
8. Well No.	001
9. Pool name or Wildcat	VACUUM GRAYBURG/SAN ANDRES

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: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Phillips Petroleum Company	3. Address of Operator 4001 Penbrook Street Odessa, TX 79762
4. Well Location Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>33</u> Township <u>17S</u> Range <u>35E</u> NMPM LEA County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3962' GL	

11.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>CLN OUT, TREAT F/SCALE, ACIDIZE, RET T/PROD</u> <input checked="" type="checkbox"/>	

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.

04/27/99 MIRU DDU, COOH W/RODS & PMP, NU BOP, COOH W/TBG, CK TD FOUND SCALE, GIH W/CSG SCRPR, START OUT HOLE
04/28/99 COOH W/SCRPR, GIH W/PKR TST TBG, SET PKR @ 4065', LD/TST CSG T/1000 PSI OK PMP SCALE CONVERTER, SD
04/29/99 RU SWAB, TBG & CSG, 0 PSI, SWAB DRY, REC 19 BBL WTR, RD SWAB, MIRU HES, TST LNS T/3500 PSI, PMP
2000 GAL 15% CARB ACID, PMP 1500# RK SALT & 1500# 100 MESH SALT IN 1500 GAL GEL BRINE, PMP 2000
GAL ACID, PMP BLK, PMP 2000 GAL ACID, FLUSH W/43 BBL WTR, TOT LD 381 BBL AVG RATE 5 BPM MAX PSI
3076 AVG PSI 2363 ISIP 2206 5 MIN 1758 10 MIN 1430 15 MIN 1102, 697 PSI INCR BLK #1 1011 PSI
INCR ON BLK #2, RDMO HES, RU SWAB, TBG PSI 820, FL SURF, SWAB DWN T/2800' REC 40 BBL.
04/30/99 RU SWAB, TBG PSI 160, FL START 2800', REC 3 BBL, RD SWAB, COOH W/PKR, GIH W/PROD TBG, ND BOP
05/01/99 & 05/02/99 CREW OFF
05/03/99 GIH W/PMP & RODS, RDMO DDU, TEMP DROP F/REPORT
(CONTINUED ON BACK)

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

SIGNATURE Larry M. Sanders TITLE Senior Regulation Analyst DATE 5/24/99
TYPE OR PRINT NAME Larry M. Sanders TELEPHONE NO. (915) 368-1488

(This space for State Use)

ORIGINAL SIGNED BY

MAY 28 1999

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

EVAC #3374-001 CONTINUED

05/04/99

WELL PMPG.

4-30 PMPD SCALE SQZ

5-15 WELL TST: 62.1 OIL, 218.4 WTR, 27 MCF GAS

5-16 WELL TST: 55.9 OIL, 193.9 WTR, 26.4 MCF GAS

5-17 WELL TST: 53.6 OIL, 183.1 WTR, 25 MCF GAS, FL LEVEL 4314', GAS FREE FL 205'

COMPLETE DROP F/REPORT