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	OIL CONSERVA	TIC	N DIVISION		
P.O. Box 1980, Hobbs, NM 88240 P.O. Box				WELL API NO. 30-025-03000	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210				5. Indicate Type of Lease	— ¬
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE A FEE 6. State Oil & Gas Lesse No. B-2519	<u>-</u>	
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	
1. Type of Well: OE. GAS WELL X WELL	OTHER	·. <u>j</u>		East Vacuum Gb/SA Unit Tract 3467	
2 Name of Operator Phillips Petroleum	Company			8. Well No. 024	
3. Address of Operator 4001 Penbrook St.,	Odessa, TX 79762			9. Pool name or Wildcat Vacuum. Gb/SA	
4. Well Location Unit Letter A : 660	Feet From The North		Line and 660	Feet From TheEastI	Line
Section 34	Township 17S	Ra	nge 35E	NMPM Lea Count	
	10. Elevation (Show w 3922.5	rhether.	DF, RKB, RT, GR, etc.)		
11. Check A	Appropriate Box to India		Nature of Notice Re	enort or Other Data	
NOTICE OF INT		-		SEQUENT 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 CE	MENT JOB	
OTHER:	·····		OTHER: Tempora	rily Abandon	X
12. Describe Proposed or Completed Operat work) SEE RULE 1103.	ions (Clearly state all pertinent des	lails, an	d give pertinent dates, includ	ing estimated date of starting any proposed	
06-15-94 - MIRU NU BO	P. COOH w/tubing	gan	d sub pump. Li	O sub pump. GIH w/CIBP.	
Set @4060' 06-16-94 - Circ. Hole csg. to 50	. Load csg. with	10 370	<pre># brine and te in 160 bbls 1</pre>	est to 500# for 30 mins.	
111	/	Th Ab	nis Approval of D andon ment Ex pi r	Temporary	
SION OF TURE	and complete to the best of my knowled	dge and		cory Affairs DATE 06-16-94	
TYPE OR PRINT NAME I. M. Sand	lers			(915) TELEPHONE NO. 368-14	38
(This space for State Use)		C	DRIGINAL SIGNED BY		74
APPROVED BY		— mı	B	DATE	_
CONDITIONS OF AFFROVAL, IF ANY:					

ACCENTED

200

THE PROPERTY OF