

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

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.)		WELL API NO. 30-025-03016
1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER ☐		5. Indicate Type of Lease STATE ☒ FEE ☐
2. Name of Operator Phillips Petroleum Company		6. State Oil & Gas Lease No. B-2273
3. Address of Operator 4001 Penbrook St., Odessa, TX 79762		7. Lease Name or Unit Agreement Name East Vacuum GB/SA Unit Tract 3456
4. Well Location Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line Section 34 Township 17-S Range 35-E NMPM Lea County		8. Well No. 001
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GL 3939' 3950'		9. Pool name or Wildcat Vacuum GB/SA

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: ☐	

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.

6-17-91: PU DDU. Kill well. COOH w/tbg & subequip. RU HLS. Perforate 5" liner w/4" guns, 2 shots/ft as follows: 4505' to 4514', 4525' to 4535'. RD HLS. GIH w/pkr. Set @ 4240'. Load and test backside to 500# OK. RU Charger - acidize w/6000 gals of 15% NEFe HCl w/clay stabilizer & w/5% Techni Wet 425. Drop 4000# of R.S. as blocking agent. Flush w/30 bbl - 2% KCl. ISIP 1500# Max press 2900# Avg Rate 3.6 bbl/min. 15 min 1000#. Swab back 139 bbl of spent acid - 1% oil cut. COOH w/tbg & pkr. GIH w/sub pump & 129 jt of 2-7/8". N.D. BOP RD DDU. Pump 15 hr no test.

6-22-91: Pump 24 hr - 232 BOPD, 542 BWPD, 176 MCF

6-23-91: 106 BOPD, 516 BWPD, 172 MCF

6-24-91: 34 BOPD, 385 BWPD, 96 MCF

6-25-91: 30 BOPD, 345 BWPD, 44 MCF

Complete drop from report.

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

SIGNATURE L. M. Sanders TITLE Supv. Regulation Pro. DATE 7/29/91

TYPE OR PRINT NAME L. M. Sanders TELEPHONE NO. 368-1488

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: