

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.
30-025-20527

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-1497

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 ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Phillips Petroleum Company

3. Address of Operator
4001 Penbrook St., Odessa, TX 79762

4. Well Location
Unit Letter E : 2310 Feet From The North Line and 990 Feet From The West Line
Section 26 Township 17S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3916' GR

7. Lease Name or Unit Agreement Name

Vacuum Abo Unit

8. Well No.
79 (Btry 4, Tract 6E)

9. Pool name or Wildcat
Vacuum Abo Reef

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.

1-03 thru
3-06

3-7-89: Acidized perms 8546'-8820' w/5000 gals 28% NEFe HCl acid w/1 drum Techni-wet 425. WIH w/2-3/8" production tbg & submersible pump, tbg @ 8235', pump @ 8310'.

3-11-89: 8932' PTD. Pmpd 24 hrs, 11 BO, 398 BW from 5-1/2" csg perms 8546'-8820'. Job complete.

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

SIGNATURE J. L. Maples TITLE Assist., Reg. & Pro. DATE 6/20/90

TYPE OR PRINT NAME J. L. Maples TELEPHONE NO. 367-1411

(This space for State Use) ORIGINAL SIGNED BY JERRY CEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUN 25 1990