

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 88240
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-20779
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	WEST VACUUM SWD (FORMERLY M. E. HALE #11)
8. Well No.	11
9. Pool name or Wildcat	VACUUM 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> SWD
2. Name of Operator Phillips Petroleum Company
3. Address of Operator 4001 Penbrook Street, Odessa, TX 79762
4. Well Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>SOUTH</u> Line and <u>2310</u> Feet From The <u>WEST</u> Line Section <u>35</u> Township <u>17-S</u> Range <u>34-E</u> NMPM <u>LEA</u> County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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

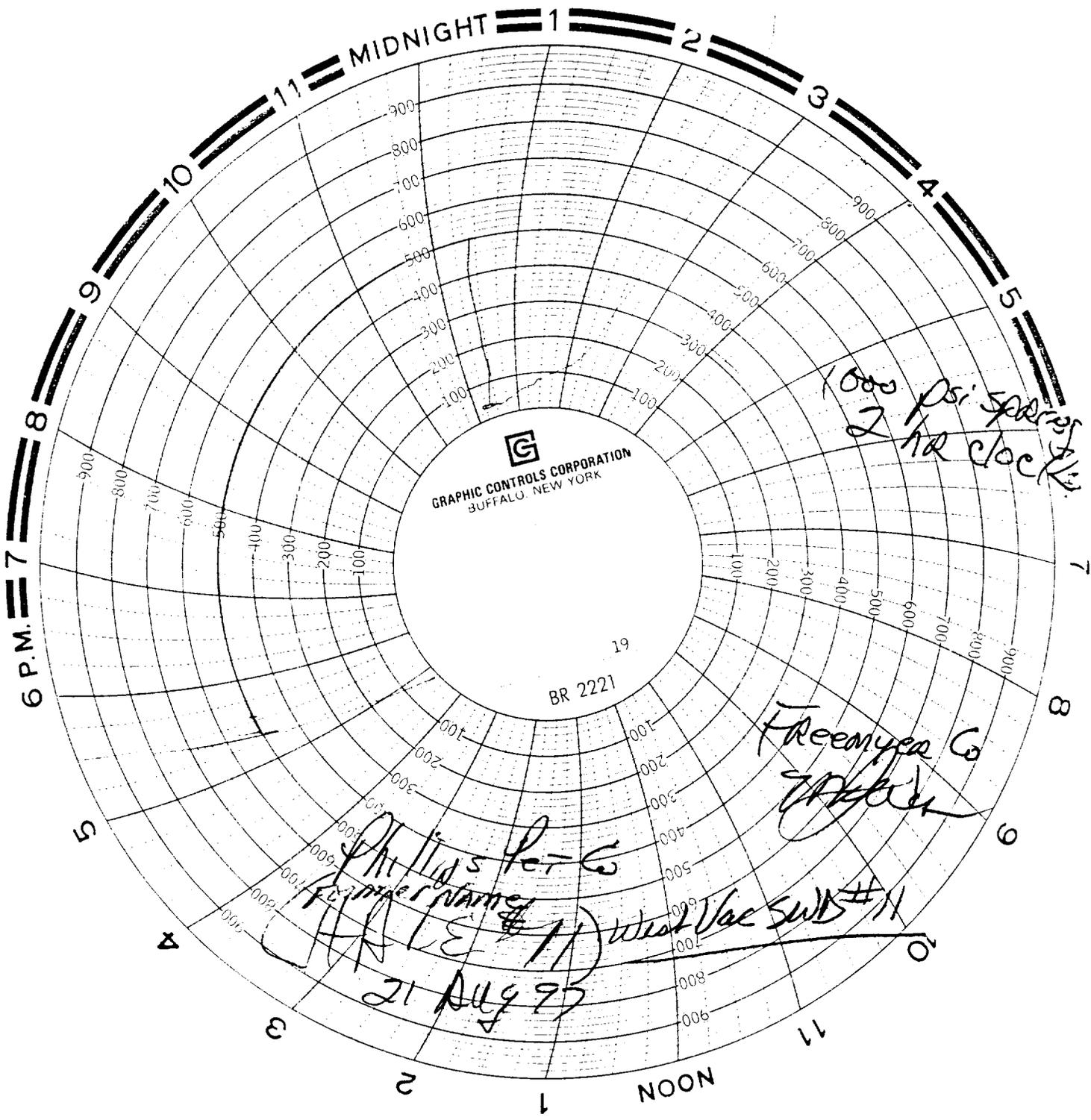
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE 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>PERFORM INTEGRITY TEST</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.
**08/21/97 PERFORM INTEGRITY TEST PER NMOCD REQUIREMENTS
RAN CHART (FREEMYER CO. - 1000 PSI SPRING - 2 HR CLOCK)**

*This report of test was
submitted to the
09/08/97*

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE [Signature] TITLE Senior Regulation Analyst DATE 09/08/97
TYPE OR PRINT NAME Larry M. Sanders TELEPHONE NO. (915)368-1488

(This space for State Use)
APPROVED BY CHRIS WILLIAMS TITLE DISTRICT SUPERVISOR DATE 09/08/97
CONDITIONS OF APPROVAL, IF ANY:




 GRAPHIC CONTROLS CORPORATION
 BUFFALO, NEW YORK

BR 2221 19

1000 psi spikes
2 hr clock

Freemeyer Co
[Signature]

Phillips Pet-Co
former plant

H.E. #11 what Vae SWB #11
21 Aug 93