State of New Mexico Form C-103 Submit 3 Copies To Appropriate District Energy, Minerals and Natural Resources Revised March 25, 1999 Office District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-20832 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE X FEE \square Santa Fe, NM 87505 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 B-1423-2 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) VACUUM GLORIETA EAST UNIT 1. Type of Well: TRACT 10 Oil Well Gas Well Other 8. Well No. 2. Name of Operator Phillips Petroleum Company 9. Pool name or Wildcat 3. Address of Operator VACUUM GLORIETA 4001 Penbrook Street Odessa, TX 79762 4. Well Location **EAST** 1980 G 2180 NORTH feet from the line feet from the line and Unit Letter **LEA** 35E **NMPM** County 28 Township 17S Range Section 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PLUG AND ABANDON PERFORM REMEDIAL WORK **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **TEMPORARILY ABANDON ABANDONMENT** CASING TEST AND MULTIPLE PULL OR ALTER CASING **CEMENT JOB** COMPLETION OTHER: CLEAN OUT, RETEST, REVIEW 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. 02/22/01 MIRU POOL #682 ND WH NU BOP UNLD TALLY TBG PU CSG SCRPR GIH TAG CIBP @ 6070' SOOH W/TBG. 02/23/01 COOH W/CSG SCRPR PU PKR GIH SET RTTS PKR @ 6013' TST CIBP T/500 PSI OK LD BKSIDE TST T/

I hereby certify that the information above is true and	complete to the best of my knowledge and b	elief.	
SIGNATURE SALETON	TITLE REG. PROPATIO	ON SPECIALIST DATE	1/0
Type or print name LARRY M. SANDERS	2/2/15	Telephone No. 915/368-1	1488
(This space for State use)			. •
APPROVED BY	TITLĘ	DATE	

500 PSI OK RUN PRETST CHART 500 PSI 30 MIN CSG/CIBP OK SOOH LD TBG.

02/26/01 COOH W/TBG/PKR ND BOP NU WH & 2-3/8 X 4' SUB RD POOL NMOCD T/RETEST IN FEW DAYS - DROP

F/DIMS REPORT.