State of New Mexico Submit 3 Copies to Appropriate District Office Form C-103 Eı /, Minerals and Natural Resources Department Revised 1-1-89 DISTRICTI OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30-025-20854 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE [1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. B-1334-1 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Vacuum Glorieta East Unit Type of Well: GAS WELL Tract 3 WELL X OTHER 2 Name of Operator 8. Well No. Phillips Petroleum Company 3. Address of Operator 9. Pool name or Wildcat 4001 Penbrook St., Odessa, Texas 79762 Vacuum Glorieta 4. Well Location Unit Letter C: 760 Feet From The North Line and 1790 Feet From The West 31 Section Township 17-S 35-E Range **NMPM** Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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: Casing Integrity Test 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed 2/15/94 RU DDU. COOH with rods and pump. Install BOP. COOH with tubing and anchor. GIH with 2-3/8" produciton tubing and packer. Set packer at 5920'. Run casing integrity test. Pressure casing to 500#. Held ok. Release pkr. 2/16/94 and COOH. Tubing - run/pull. GIH with 2-3/8" tbg SN, landed at 6050' and anchor at 5864'. GIH with pump and rods and return to production.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Supv., Reg. Affairs TYPE OR PRINT NAME L. M. Sanders	
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON	TELEPHONE TO 368-1488
APPROVED BY DISTRICT I SUPERVISOR	FEB 23 1994

- TITLE

CONDITIONS OF APPROVAL, IP ANY:

