Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

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Revised	1-1-4

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION P.O. Box 2088	30-025-20885	
P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 8	7504-2088 5. Indicate Type of Lease STATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410	6. State Oil & Gas Lesse No. B-1838-1	
SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF DIFFERENT RESERVOIR. USE "APPLICATION FOR PER (FORM C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name MIT"	
1. Type of Well: ORL GAS WELL X WELL OTHER	Vacuum Glorieta East Unit Tract 25	
2 Name of Operator Phillips Petroleum Company	8. Well No.	
3. Address of Operator 4001 Penbrook Street, Odessa, TX 79762	9. Pool same or Wildcat Vacuum Glorieta	
4. Well Location Unit Letter E: 1880 Feet From The North Line and 660 Feet From The West Line		
Section 32 Township 17-S Range 35-E NMPM Lea 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 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 work) SEE RULE 1103.		
01-12-94 - COOH w/rods and pump. COOH w/2-3/8" prod. tubing. GIH w/prod. tubing and 4-1/2" pkr. Set at 5970'. Run Casing Integrity Test. Press. to 500#. Held O.K.		
ol-13-94 - Release pkr. and COOH w/prod. tubing. GIH w/SN, 8 jts. 2-3/8" tbg. Anchor and remainder of tubing. Total tubing 198 jts. SN set at 6219' and anchor set at5970'. ND BOP. GIH w/rods and pump. Hang well on.		
I hereby cartify that the information above is trug and complete to the best of my knowledge and belief.		
SIONATURE S.M. Janley III	Supv.Regulatory Affairs DATE 01-27-94	
TYPEORPRINT NAME L. M. Sanders	(915) TELEPHONE NO. 368-1488	
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON FIRST 1 6 1004		
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