

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. 30-025-26776
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1482-3
7. Lease Name or Unit Agreement Name East Vacuum Gb/SA Unit Tract 2720
8. Well No. 007
9. Pool name or Wildcat Vacuum Gb/SA

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Phillips Petroleum Company	
3. Address of Operator 4001 Penbrook St., Odessa, Texas 79762	
4. Well Location Unit Letter <u>H</u> : <u>150</u> Feet From The <u>East</u> Line and <u>2450</u> Feet From The <u>North</u> Line Section <u>27</u> Township <u>17-S</u> Range <u>35-E</u> NMPM <u>Lea</u> County <u></u>	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3923' GR	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Remove CIBP & Acidize ☒

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.

10/25/94 MIRU DDU. Cooh w/pump and rods. NU BOP and COOH w/tbg.  
10/26/94 GIH w/scraper to 4351'. MIRU and PU GIH w/collars, and tbg. TAG @ 4445'.  
Start drilling on CIBP.  
10/28/94 Drill and push CIBP to 4723'. COOH LD collars and bit. PU GIH w/pkr and  
tbg. Set pkr @4192'.  
10/30/94 Acidize w/4500 gals 15% NEFE HCL.  
10/21/94 Swab. ND BOP. Change out wellhead. NU BOP. Load and test csg. ok.  
11/01/94 COOH w/pkr. GIH w/prod tbg. ND BOP. GIH w/pump and rods. Hang on. Start  
pumping.  
11/02/94 RD MO DDU.  
11/06/94 Test 12 BOPD, 148 BWPD, and 172.2 MCF.

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

SIGNATURE [Signature] TITLE Supv., Reg. Affairs DATE 11/11/94

TYPE OR PRINT NAME L. M. Sanders

TELEPHONE NO. 915/368-1488

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

NOV 17 1994

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: