Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION	WELL API NO.
DISTRICT II Santa Fe. New Mexico 87504-2088	30-025-26778
P.O. Drawer DD, Artesia, NM 88210  DISTRICT III	5. Indicate Type of Lasse STATE FEE
1000 Rio Brazos Rd., Azzec, NM 87410	6. State Oil & Gas Lesse No.
SUNDRY NOTICES AND REPORTS ON WELLS	B-1497
(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.)	7. Lease Name or Unit Agreement Name
1. Typs of Well: OR. CIAS	East Vacuum Gb/SA Unit
WELL OTHER W. I. PMX No. 92	Tract 2721
2. Name of Operator  Phillips Potreloum Company	8. Well No. 002
Phillips Petroleum Company  1. Address of Operator	9. Pool name or Wildcut
4001 Penbrook Street, Odessa, TX 79762	Vacuum Gb/SA
Unit Letter N : 2600 Feet From The West Line and 1300 Peet From The South Line	
Section 27 Township 17-S Range 35-E N  ///////////////////////////////////	MPM Lea County
3931' GR: 3942.6' RKB	
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: CTHER:	
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.	
05-20-91: MIRU DDU. NU BOP. MIRU HLS to run casing in Charger to pump 4200 gallons CHIC acid, 4000; gelled brine and 31 bbls 2% KCl flush.  Max press.: 3000#, ISIP: 1150#. ND BOP. Flat 4257'. Load and test casing/tubing annula OK. Hook up for injection. RDMO DDU. Start 05-22-91: Rate 1626 BWPD at 210#.	# rock salt in 79 bbls ange up wellhead. Set pkr us to 500# for 30 minutes.
TYPE OR PRINT NAME L. M. Sanders  (This space for Sum Use) Orig. Signed by	tion Supv. DATE 05-31-91 TELEPHONE NO. 368-1387
Paul Kautz	