

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

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.

**30-025-27315**

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

**B-2264-1**

7. Lease Name or Unit Agreement Name

**EAST VACUUM GB/SA  
TR.2155**

8. Well No.

**001**

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 ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

**Phillips Petroleum Company**

3. Address of Operator

**4001 Penbrook Street, Odessa, TX 79762**

4. Well Location

Unit Letter **0** : **1175'** Feet From The **SOUTH** Line and **2500'** Feet From The **EAST** Line

Section

**21**

Township

**17-S**

Range

**35-E**

NMPM

**LEA**

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

**3956.6' GR. (UNPREPARED)**

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: **CLEANOUT, REPERF, ACIDIZE, & RETURN** ☒

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.

**REPORT APPROVED 04/26/96 SHOULD HAVE SHOWN SUBSEQUENT REPORT INSTEAD OF NOTICE OF INTENT.**

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

SIGNATURE

*Larry M. Sanders*

TITLE **Senior Regulation Analyst** DATE **04/30/96**

TYPE OR PRINT NAME **Larry M. Sanders**

TELEPHONE NO. **(915)368-1488**

(This space for State Use)

ORIGINAL SIGNED BY **JERRY SEXTON**

APPROVED BY **DISTRICT SUPERVISOR**

TITLE

DATE

**MAY 08 1996**

CONDITIONS OF APPROVAL, IF ANY:

