

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO. 30-025-27338
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1398-14
7. Lease Name or Unit Agreement Name: EAST VACUUM GB/SA UNIT TRACT 1910
8. Well No. 004
9. Pool name or Wildcat VACUUM GRAYBURG/SAN ANDRES

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 type="checkbox"/> Gas Well <input type="checkbox"/> Other WATER INJECTION	
2. Name of Operator Phillips Petroleum Company	
3. Address of Operator 4001 Penbrook Street Odessa, TX 79762	
4. Well Location Unit Letter <u>P</u> : <u>1200</u> feet from the <u>SOUTH</u> line and <u>1200</u> feet from the <u>EAST</u> line Section <u>19</u> Township <u>17S</u> Range <u>35E</u> NMPM County <u>LEA</u>	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3977.8 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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐

OTHER: REPAIR CSG LEAK & PUT ON INJECTION ☐

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

03/07/01 DUE TO BRADENHEAD FAILURE CHECK WELLHEAD ASSY, TEST CASING, ISOLATE & REPAIR LEAK.  
ON 1/12/01 MIRU DDU NU BOP REL PKR COOH W/TBG/PKR GIH W/4-1/2 CSG SCRPR T/4525' COOH  
W/SCRPR/TBG TAG FILL 4550' GIH W/4-1/2 RBP/PKR SET RBP 4450' TST CSG T/500 PSI OK  
COOH W/PKR MIRU HES RUN CMT BOND LOG GIH PERF 4 HOLES 270' RDMO HES RU PMP TRK T/  
CSG TRY CIRC UP BRADENHEAD COULDN'T W/1000 PSI RD PMP TRK GIH W/4-1/2 RETRVNG TL  
144 JTS TBG ND BOP RU WH LEAVE 4-1/2 RBP @ 4450' PMP PKR FL RDMO DDU ON 2/16/01  
MIRU LIFTNG DEV & PWR SWVL DO MUD BETWEEN 5-12 & 8-5/8 CSG W/1" PIPE CO T/87' TAG  
TOP CMT MIRU HES PMP 7 SX CL C CMT FILL 8-5/8 CSG NMOC ON LOC RD HES RD LIFTNG  
DEV ON 3/3/01 MIRU DDU NU BOP COOH W/RBP & TBG GIH W/BIT & CLRS CO FILL F/4550-  
4718' COOH W/BIT & CLRS LD IPC TBG GIH W/4-1/2 LOCKSET & NEW 2-3/8 IPC TBG SET  
LOCKSET @ 4538' TST CSG T/500 PSI OK SENT CHART T/ODESSA (ATTACHED) -  
COMPLETE DROP F/REPORT.

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

SIGNATURE [Signature] TITLE REG. PRORATION SPECIALIST DATE 3-20-01

Type or print name LARRY M. SANDERS Telephone No. 915/368-1488

(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of approval, if any:

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