STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
HOBBS DISTRICT OFFICE

GOVERNOR

July 3, 1995

POST OFFICE BOX 1980
HOBBS, NEW MEXICO 88241-1980
(505) 393-6161

Phillips Petroleum Co

4001 Penbrook St

Odessa, TX 79762

Gentlemen:

Form C-103, Report of Plugging, for your E Vacuum GB/SA Unit Tr.1881 #1-N 18-17s-35e cannot be approved until a Division representative has made an inspection of the location and found it to be cleared to comply with Division Rules and Regulations. Please check each item in the space provided to indicate that the work has been done.

( ) 1. All pits have been filled and levelled

( ) 2. Rat hole and cellar have been filled and levelled.

( ) 3. A steel marker 4" in diameter and approximately 4' above ground level has been set in concrete. It must show the OPERATOR, LEASE NAME, WELL NUMBER, QUARTER/QUARTER SECTION OR UNIT LETTER DESIGNATION, SECTION, TOWNSHIP, and RANGE which have been permanently stenciled or welded on the marker.

( ) 4. The location has been levelled as nearly as possible to original top ground contour and has been cleared of all junk and equipment.

( ) 5. The dead men and tie downs have been cut and removed.

( ) 6. If a one-well lease or last remaining well on lease, the battery and burn pit locations have been levelled and cleared of all junk and equipment.

The above are minimum requirements and no plugging bond will be released until all locations for plugged and abandoned wells have been inspected and Form C-103 approved. When all of the work outlined above has been done, please notify this office by filling in the blank form below and returning this letter to us so that our representative will not have to make more than one trip to the location.

Very truly yours,

OIL CONSERVATION DIVISION

Jerry Sexton

Jerry Sexton, Supervisor, Dist. I

FILL IN BELOW AND RETURN TO: Oil Conservation Division, P.O. Box 1980, Hobbs, NM 88241

I certify that the above work has been done and the well referenced above is ready for your inspection and approval.

OPERATOR

DATE

NAME AND TITLE