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Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-8

Appropriate district Office	Energy, witherars and Natural K	csources Department	Revised 1-1-89	
ISTRICT I	OIL CONSERVATIO	ON DIVISION		
O. Box 1980, Hobbs NM 88241-1980	2040 Pacheco	St.	WELL API NO.	
ISTRICT II	Santa Fe, NM 8	37505	30-025-27422 5. Indicate Type of Lease	
O. Drawer DD, Artesia, NM 88210			STATE X FEE	
ISTRICT III 000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	
SHALDDY NOT	ICES AND REPORTS ON WELL		E-7259	7777
	POSALS TO DRILL OR TO DEEPEN (
DIFFERENT RESER	RVOIR. USE "APPLICATION FOR PERI	MIT"	7. Lease Name or Unit Agreement Name	
Type of Well:	-101) FOR SUCH PROPOSALS.)		EAST VACUUM GB/SA UNIT	
OIL GAS WELL WELL	OTHER		TRACT #1978	
Name of Operator			8. Well No.	
illips Petroleum Company			003	
Address of Operator			9. Pool name or Wildcat	
01 Penbrook Street Odessa	1. TX 79762		VACUUM GRAYBURG/SAN ANDRES	
Well Location Unit Letter D : 990	Feet From The NORTH	Line and 60	60 Feet From The WEST L	ine
<u> </u>				
Section 19	Township 17S Ra	nge 35E	NMPM LEA Cour	nty
	10. Elevation (Show whether		V/////////////////////////////////////	
	propriate Box to Indicate) <u>.2 RKB. 3996.9 GR</u> Nature of Natice		
*		1		
NOTICE OF IN	NTENTION TO:	308	BSEQUENT REPORT OF:	
FORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
	CHANGE PLANS	COMMENCE DRILLING	GOPNS. PLUG AND ABANDONMENT	Г
MPORARILY ABANDON L.J	CHANGE PLANS E			_
L OR ALTER CASING L		CASING TEST AND CE	EMENT JOB L	
1ER:		OTHER: STRIP OUT	RODS/PUMP: PREPARE T/TA	_[]
work) SEE RULE 1103. 10/02/98 MIRU DDU, TRY 10/05/98 FIN STRIPPING 10/06/98 FIN GIH W/CIBF (ATTACHED) CI	UNSEAT PMP, COULDN'T, NU BO OUT RODS & PMP, TRIP SCRAPP P, SET @ 4600', LD & TST T/ IRC PKR FL, COOH LD TBG, ND	OP & PAN, STRIP OU ER, START IN HOLE 740# F/30 MIN, RUN BOP & PAN, FLNG U	W/CIBP. N CHART UP WH W/8"	sed
ibg 30b, kund	DDU, LEAVE WELL IN TA STA	103, COMPLETE BROK	IZALITURI	
This Approval of T Abandonment Expira		<u> </u>		
hereby certify that the information at is t	true and complete to the best of my knowledge	e and belief.	. /10	
GNATURE / / / / / / / / / / / / / / / / / / /	clos for TH	LE <u>Senior Regulat</u>	ion Analyst DATE	19
YPE OR PRINT NAME Larry M. Sand	ders //		TELEPHONE NO. (915) 368-	148
This space for State Use)				
) D): Citor		NOV 1 0 199	8
PPROVED BY DISTAIST	DY CHRIS WILLIAMS TI	LE	DATE	
ONDITIONS OF APPROVAL, IF ANY:				



