

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.
30-025-28056

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-2317

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.)

7. Lease Name or Unit Agreement Name

M. E. Hale

1. Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER Water Injection

2. Name of Operator
Phillips Petroleum Company

8. Well No.

13

3. Address of Operator
4001 Penbrook St., Odessa, Texas 79762

9. Pool name or Wildcat

Vacuum Gb/SA

4. Well Location
Unit Letter I : 1360 Feet From The South Line and 1210 Feet From The East Line

Section 35 Township 17-S Range 34-E NMPM Lea County

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

4022' RKB

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: Convert to water 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.

12/17/92 MIRU DDU pull and LD rods and pump.

12/19/92 NU class 2 BOP - COOH w/prod tbg. GIH w/bit & scraper to 4792' clean out 7" casing COOH LD prod tbg.

12/22/92 GIH w/ Lockset pkr on 2-7/8" 6.5# J-55 IPC tbg. set packer at 4300'±. Load annulus w/pkr fluid, test casing/tbg to 500 psi. (Held - state witness)

12/23/92 RD DDU - shut well in - (waiting on injection line completion to run injection rate test.

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

SIGNATURE [Signature] TITLE Supervisor, Reg. Affairs DATE 12/23/92

TYPE OR PRINT NAME L. M. Sanders

TELEPHONE NO. 915/368-1488

(This space for State Use)

APPROVED BY ERRY SEXTON

DEC 28 1992

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: