

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 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-28061
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-2317
7. Lease Name or Unit Agreement Name STATE 35 UNIT
8. Well No. 29
9. Pool name or Wildcat VACUUM GB/SA
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4003.8' GR/4013' DF

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 **WATER INJECTION**

2. Name of Operator
Phillips Petroleum Company

3. Address of Operator
4001 Penbrook Street Odessa, TX 79762

4. Well Location
Unit Letter **I** : **1410** Feet From The **SOUTH** Line and **10** Feet From The **EAST** Line
Section **35** Township **17-S** Range **34-E** NMPM **LEA** County

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: ☐

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.

**03/25/99 RE-RAN TEST CHART. WITNESSED BY KAREN SHARP OF OCD. SHE TOOK ORIGINAL CHART
AND LEFT US COPY FOR OUR FILES.**

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

SIGNATURE

TITLE **SUPV., REGULATION/PRORATION**

DATE **03/29/99**

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

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

(This space for State Use)

ORIGINAL SIGNED BY

GARY WINK

APPROVED BY

FIELD REP. II

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUL 27 1999

TC SC

