Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

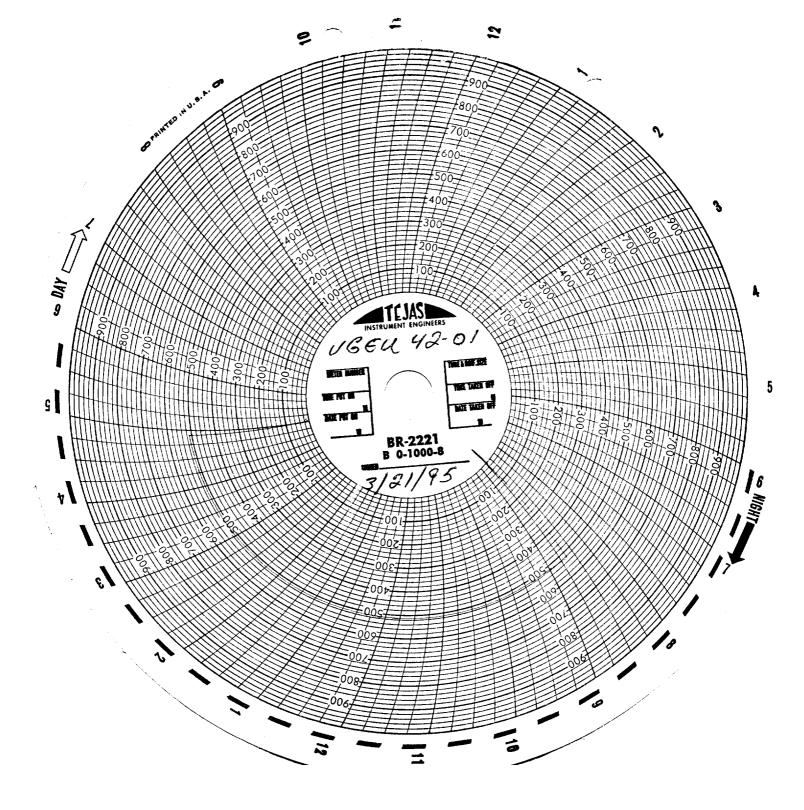
Form C-103 Revised 1-1-9

District Office		obounded 2 opus unitality	Kevined 1-1-89
DISTRICT I	OIL CONSERVATIO	ON DIVISION	WELL API NO.
P.O. Box 1980, Hobbs NM 88240	P.O. Box 20		30-025-13505
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	87504-2088	5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE A FEE 6. State Oil & Gas Lease No.
			B-2517
	ICES AND REPORTS ON WEL		
(DO NOT USE THIS FORM FOR PR	OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PER	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
(FORM C	-101) FOR SUCH PROPOSALS.)		VACUUM GLORIETA EAST UNIT
1. Type of Well: OIL GAS WELL X WELL	OTHER		TRACT 42
2. Name of Operator	OTHER		9 Well Me
Phillips Petroleum Comp	anv		8. Well No.
3. Address of Operator	en,y		9. Pool name or Wildcat
4001 Penbrook Street, 0	dessa, TX 79762		VACUUM GLORIETA
4. Well Location Unit Letter E : 165	5 Feet From The NORTH	Line and 99	NO WEST
		LAIN AIR	Feet From The WEST Lin
Section 33			NMPM LEA County
	10. Elevation (Show wheth		
11. Check Ar		3946' GR	
	propriate Box to Indicate	I .	-
NOTICE OF I	NTENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
		1	
PULL OR ALTER CASING	<u></u>	CASING TEST AND CE	MENT JOB L
OTHER:		OTHER: TEMPORAR	RILY ABANDON
12. Describe Proposed or Completed Operwork) SEE RULE 1103.	rations (Clearly state all pertinent det	ails, and give pertinent dat	es, including estimated date of starting any propose
3/18/95 MIRU DDU AND C	OOH W/PRODUCTION EQUIPMENT OF THE PROPERTY OF	MENT. BALE WELL	
3/20/95 RUN TMD LOG.	GIH W/CIBP AND SET AT	5982'. GIH W/RC	DDS AND COOH LD RODS.
3/21/95 CIBP SET AT 59	82'. CIRC. PACKER FLU	ID. TEST CASING	TO 500#. HELD OK. LAY DOWN
TUBING. WELL	TA'D.		
		This Approval	of Tempoverse
		Abandonment Exp	of Temporary 4-1-2000-
			3,000
I hereby certify that the information above is to	Die and complete to the hest of my knowledge	and haliaf	
In O			
SIGNATURE	maller IIII	E SUPERVISOR, R	EG. AFFAIRS DATE 3/23/95
TYPE OR PRINT NAME M. SANDER			TELEPHONE NO.915/368-148
(This space for State Use) ORIGIN	VAL SIGNED BY		
G	ARY WINK		APR 07 1995
APPROVED BY	ELD REP. N		
CONDITIONS OF APPROVAL, IF ANY:	Thru	E	DATE

X'S

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