Submit 3 Copies To Appropriate District	3 Copies To Appropriate District State of New Mexico			Form C-103 Revised March 25, 1999
Office District I			WELL API NO.	
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONSERVATION DIVISION		30025-31098	
811 South First, Artesia, NM 87210 District III	2040 South Pacheco		5. Indicate Type of Le	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, N	NM 87505	STATE X	FEE 🗆
2040 South Pacheco, Santa Fe, NM 87505			6. State Oil & Gas Le B-1608	ease No.
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: EAST VACUUM GR/SA UNIT	
Type of Well: Oil Well □ Gas Well □ Other OBSERVATION WELL			TRACT 3332	
2. Name of Operator			8. Well No.	
Phillips Petroleum Company			003	
3. Address of Operator			9. Pool name or Wildcat VACUUM GRAYBURG/SAN ANDRES	
4001 Penbrook Street Odessa, TX 79762 VACUUM GRAYBURG/SAN ANDRES 4. Well Location				
Unit Letter B:	135 feet from the	NORTH line and	1534 feet from t	he <u>FEL</u> line
Section 33	Township 17			County LEA
	10. Elevation (Show wh	ether DR, RKB, RT, GR, et 3952' GL	(c.)	
11. Check A	ppropriate Box to Ind	licate Nature of Notice,	Report, or Other D	ata
NOTICE OF INTE	-	1	SEQUENT REPO	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	☐ REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL		PLUG AND ENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB		
OTHER:		OTHER: MIT ON O	BSERVATION WELL	
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.				
03/27/01 RAN & PASSED ME	CHANICAL INTEGRITY TE	ST ON OBSERVATION WELL	•	
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I hereby certify that the information above	is true and complete to the b	pest of my knowledge and belie	ef.	
SIGNATURE AND	myorb	TITLE SUPERVISOR, REC	6. & PRORATION DA	ATE <u>04/04/01</u>
Type or print name LARRY M. SANDE	RS SIMS		Telephone	No. 915/368-1488
(This space for State use)				
APPROVED BY GENERAL APPROV	A STANTO BY	TITLE	DAT	TE
Conditions of approval, if any:	T. (5.889) H			



