Submit to: Appropriate District Office
State Lease – 6 copies
Fee Lease – 5 copies

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-101
Revised 1-1-89

API NO. (assigned by OCD on New Wells) 30-025-32363

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. A-1320

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:
DRILL [X] RE-ENTER [ ] DEEPEN [ ] PLUG BACK [ ]

b. Type of Well:
OIL WELL [X] GAS WELL [ ] OTHER SINGLE ZONE [ ] MULTIPLE ZONE [ ]

7. Lease Name or Unit Agreement Name (13114)
Vacuum Glorieta East Unit

2. Name of Operator
Phillips Petroleum Company (017643)

8. Well No. 11 Tract 2

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

9. Pool name or Wildcat
Vacuum Glorieta (62160)

4. Well Location
Unit Letter A : 1200 Feet From The North Line and 1185 Feet From The East Line

Section 32 Township 17-S Range 35-E NMPM Lea County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
6300'	Paddock	Rotary

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
3956.8' GL (Unprepared)	Blanket	NA	Upon Approval

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	8-5/8"	24#	1575'	450 sx C tail w/	Surf.
				200 sx C	1250'
7-7/8"	5-1/2"	15.5#	6300'	300 sx C 50/50 poz.	5200'

2nd Stg: 1000 sx C 65/35 poz-Surf. tail w/300 sx C 50/50 poz. 4000'

NSL-3337

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE L. M. Sanders TITLE Supv.Regulatory Affairs DATE 12-14-93

TYPE OR PRINT NAME L. M. Sanders TELEPHONE NO. (915) 368-1488

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE DATE JAN 06 1994

CONDITIONS OF APPROVAL, IF ANY: