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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Amerada Petroleum Corporation	8. Farm or Lease Name T. Anderson
3. Address of Operator P. O. Box 668 - Hobbs, New Mexico	9. Well No. 3
4. Location of Well UNIT LETTER K 2310 FEET FROM THE South LINE AND 1650 FEET FROM THE West LINE, SECTION 8 TOWNSHIP 20-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Monument Paddock
15. Elevation (Show whether DF, RT, GR, etc.) 3558' DF	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. 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.

Run retrievable cementer. Squeeze perforations 5168' to 5198' and 5205' to 5220' with 100 sx. Class "C" cement. Drill out to 5200', spot 300 gals. 15% clean-up acid. Perforate 5-1/2" casing from 5150' to 5160', 5167' to 5187' and 5194' to 5197' with two Hyper Jet shots per foot and displace acid. Swab test. Acidize with 5000 gals. 15% acid with diverter and SAF preflush. Resume production.

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

SIGNED [Signature] TITLE **District Superintendent**

DATE **4-16-68**

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: