	_		
NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION			Supersedes Old
SANTA FE	NEW MEXICO OIL CONSE	ERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State Fee. X
OPERATOR			5. State Oil & Gas Lease No.
SUND (DO NOT USE THIS FORM FOR PR USE "APPLICA	RY NOTICES AND REPORTS ON A ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BA ITION FOR PERMIT -" (FORM C-101) FOR SUCH	WELLS CK TO A DIFFERENT RESERVOIR.	
l. OIL GAS WELL WELL	OTHER WATER INJECT!	ION WELL	7. Unit Agreement Name LANGLII MATTIX PENROSE SANI
2. Name of Operator			8. Farm or Lease Name UNI
AMADARKO PRO	ODUCTION COMPANY		TRACT NO. 10
3. Address of Operator			9. Well No.
P. O. BOX 247, HOBBS, NEW MEXICO 88240			3
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER,,	1020 FEET FROM THE SOUTH	LINE AND FEET FRO	MANGUE NATTIA
THE <u>EAST</u> LINE, SECT	TION 21 TOWNSHIP 22	5 RANGE 37ENMPN	
	15. Elevation (Show whether L)F, RT, GR, etc.)	12. County
16. Chark	Appropriate Box To Indicate Na	ature of Nation Papers on O	
	INTENTION TO:	<u>-</u>	IT REPORT OF:
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	PLUG AND ABANDON	REMEDIAL WORK COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JOB	ALTERING CASING PLUG AND ABANDONMENT
OTHER	OTHER CONVERT FOR WATER INJECTION X AND COMMENCE INJECTION		
work) SEE RULE 1103.	Operations (Clearly state all pertinent detail) WELL SERVICING UNIT.		

- 2. REMOVE PUMPING EQUIPMENT.
- 3. RUN 2-3/8" PLASTIC LINED TUBING WITH JOHNSTON MODEL 101-S TENSION PACKER.
- 4. SET PACKER IN CASING AT 32891.
- 5. RIG DOWN WELL SERVICING UNIT.
- 6. INSTALL INJECTION WELLHEAD CONNECTIONS.
- 7. PLACE WELL ON INJECTION EFFECTIVE 1/23/70 UNDER OIL CONSERVATION COMMISSION ORDER NO. MEX-333.

VIL CONSERVATION COM	HIJOTON ORDER NO. AND DODA	
18. I hereby certify that the information above is true and complet	e to the best of my knowledge and belief.	
	-	
SIGNED DO TODE COLOR	TITLE - NEWWOOD AND COLUMN TO STATE OF THE S	DATE 0/10/70
	TITLE DISTRICT SUPERINTENDENT	2/12//0
1 10 11/11 a		g grants of
Jo 1 11/1/2 -4	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED	
APPROVED BY SCILLE SICE Combile	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		
CONDITIONS OF AFTROVAL, IT ANT.		