NO. OF COPIES RECEIVED	4		Form C-103
DISTRIBUTION		RECEIVED	Supersedes Old
SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE			
U.S.G.S.	1	JAN 3 1973	5a, Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR	+		5. State Oil & Gas Lease No.
		ARTESIA, OFFICE	B-3635
(DO NOT USE THIS FO USE	SUNDR	RY NOTICES AND REPORTS ON WELLS	
1. 01L GAS			7. Unit Agreement Name
WELL WELL	د لیا	OTHER.	Burnham GSA Unit
2. Name of Operator			8. Farm or Lease Name
Anadarko H	Tract 4		
3. Address of Operator			9. Well No.
P. O. Box	67. IO	co Hills, New Mexico 88255	#1
4. Location of Well		•	10. Field and Pool, or Wildcat
UNIT LETTER P		660 FEET FROM THE South LINE AND 660 FEET FROM	West Square Lake
THE East	INE SECTI	ON 2 TOWNSHIP 17-5 RANGE 30-E NMPM.	
		NMPM.	
	11111	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	111111.	3763	Eddy
16.	Cheek		
	Check	Appropriate Box To Indicate Nature of Notice, Report or Oth	er Data
NOTI			
NOTIO		NTENTION TO: SUBSEQUENT	REPORT OF:
NOTI		NTENTION TO: SUBSEQUENT	ALTERING CASING
			- · · · · · ·
PERFORM REMEDIAL WORK		PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS.	ALTERING CASING Plug and Abandonment
PERFORM REMEDIAL WORK		PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING Plug and Abandonment
PERFORM REMEDIAL WORK		PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS.	ALTERING CASING PLUG AND ABANDONMENT

Cleaned out to 3218° GL. Ran GR-Acoustic log. Perforated $2950^{\circ} - 2958^{\circ}$, $2966^{\circ} - 2972^{\circ}$ and $3048^{\circ} - 3056^{\circ}$. Lovington Sand zone open hole $3200^{\circ} - 3210^{\circ}$. Treated perforations with 500 gallons of 15% HCL. Ran production tubing and put on production December 15, 1972.

Production before workover - 3 BOPD "after " - 7 BOPD

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

Original Signed By SIGNEDD. R. Layton	TITLE Area Supervisor	December 28, 1972
APPROVED BY W. a. Grassett	TITLEOIL AND GAS INSPECTOR	JAN 1 5 1973

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CONDITIONS OF APPROVAL, IF ANY: