

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

WELL API NO.

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-11276-2

7. Lease Name or Unit Agreement Name

Cowtown Unit Tract 4

8. Well No.
402

9. Pool name or Wildcat
Artesia Qn-GB-SA

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. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Anadarko Petroleum Corporation

3. Address of Operator
P.O. Drawer 130, Artesia, New Mexico 88211-0130

4. Well Location
Unit Letter E : 1320 Feet From The North Line and 330 Feet From The West Line
Section 24 Township 18S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3513' GL

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Put back on production ☒

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.

- MIRUPU. Swabbed well. Decision was made not to plug well but to put well back on production.
- TIH w/ 91 jts of 2-7/8" N-80 tbg. TIH w/ 1-1/16" pump. Hung well off. RDP.
- Set Oilwell 5A pumping unit.
- Hooked up electrical service.
- Ready to pump on 11-21-92.

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

SIGNATURE Mike Braswell TITLE Field Foreman

DATE 11-30-92

TYPE OR PRINT NAME Mike Braswell

TELEPHONE NO. 677-2411

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

TITLE _____ DATE _____

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY:

DEC 10 1992