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NEW MEXICO OIL CONSERVATION COMMISSION
OCT 20 1975
O. C. C.
ARTESIA, OFFICE

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- X Water Injection Well		7. Unit Agreement Name Far West Loco Hills Sand Unit
2. Name of Operator Anadarko Production Company ✓		8. Farm or Lease Name Tract No. 9
3. Address of Operator P. O. Box 67, Loco Hills, New Mexico 88255		9. Well No. 12
4. Location of Well UNIT LETTER E 1650 FEET FROM THE North LINE AND 330 FEET FROM THE West LINE, SECTION 9 TOWNSHIP 18s RANGE 29E NMPM.		10. Field and Pool, or Wildcat Loco Hills
15. Elevation (Show whether DF, RT, GR, etc.) 3506' GL		12. County Eddy

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER Converted to Producer <input checked="" type="checkbox"/>

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.

1. Rigged up pulling unit, pulled plastic coated tubing and packer.
2. Ran 2 3/8" tubing, pump and rods.
3. Set pumping unit.
4. Put well on production, pumping 1 BOPD and no water.

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

SIGNED **Original Signed by Jerry E. Buckles** TITLE **Area Supervisor** DATE **October 14, 1975**

APPROVED BY **W. A. Gressett** TITLE **SUPERVISOR, DISTRICT II** DATE **OCT 29 1975**
 CONDITIONS OF APPROVAL, IF ANY:

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NOV 10 1961

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