STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [XX] Fee [ ]

5. State Oil & Gas Lease No.: L 1607

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 [ ] GAS WELL [XX] OTHER-

7. Unit Agreement Name

2. Name of Operator: Anadarko Production Company

8. Farm or Lease Name: New Mexico State "AA"

3. Address of Operator: P. O. Box 67, Loco Hills, New Mexico 88255

9. Well No.: 1

4. Location of Well: UNIT LETTER F, 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 35 TOWNSHIP 18S RANGE 28E NMPM.

10. Field and Pool, or Wildcat: Wildcat Strawn

15. Elevation (Show whether DF, RT, GR, etc.): 3481.5 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 [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER Abandon Atoka; Complete Strawn [X]		OTHER [ ]	

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. Pulling unit over hole.
2. Load tubing & kill well.
3. Remove X-tree & install BOP.
4. Unset packer & circulate 3% KCL packer fluid.
5. Pull packer.
6. Run Wireline set CIBP - set @ 10,510' KB (abandon Atoka).
7. Run Wireline dump-bailer - spot 35' (6 sx) cement on CIBP from 10,510' - 10,475' KB.
8. Perforate Strawn 9951' - 54' & 9965'-73' KB.
9. Run & set production packer @ 9925' KB.
10. Remove BOP & install X-tree.
11. Swab tubing dry.
12. Acidize w/2200 gals 7½% MSR-100 & Ball Sealers.
13. Swab test.

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

SIGNED [signature] TITLE Area Supervisor DATE Nov. 19, 1981

APPROVED BY W. A. Gressett TITLE SUPERVISOR, DISTRICT II DATE NOV 25 1981

CONDITIONS OF APPROVAL, IF ANY: