

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-103  
Revised 10-1-78

FEB 1 1982

O. C. D.

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> For <input type="checkbox"/>
5. State Oil & Gas Lease No. B - 8096

SUNDRY NOTICES AND REPORTS ON WELLS ARTESIA, OFFICE

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Anadarko Production Company	8. Farm or Lease Name Continental State
3. Address of Operator P. O. Box 67, Loco Hills, New Mexico 88255	9. Well No. 3
4. Location of Well UNIT LETTER B 660 FEET FROM THE North LINE AND 1650 FEET FROM THE East LINE, SECTION 10 TOWNSHIP 19S RANGE 29E NMPM.	10. Field and Pool, or Wildcat TurkeyTrack-7Rivers-Q-GB
15. Elevation (Show whether DF, RT, GR, etc.)	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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>		Return to production <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.

This well has been Temporarily Abandoned for a number of years; it was re-activated  
January 24, 1982.

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 January 29, 1982  
APPROVED BY W.A. Gussert TITLE SUPERVISOR, DISTRICT DATE FEB 4 1982  
CONDITIONS OF APPROVAL, IF ANY: