

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

15
DP

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

OIL CONSERVATION DIVISION

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.

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.)

RECEIVED

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 88210

4. Well Location
Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line

Section 1 Township 19S Range 25E NMPM Eddy County

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

3413.9 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: Add Morrow Clastic perms ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

NOTE: Well is now open in Upper Morrow Clastics Formation at 9022-28'.

1. RUPU. Install BOP and TOH.
2. GIH with bit and drill out CIBP at 9150'. (This will re-open Lower Morrow Clastic perms at 9187-86'). TOH.
3. Perforate additional holes from 9174-78'.
4. GIH with pkr and fracture treat Morrow perms.
5. Test well and return to sales if commercial.

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

SIGNATURE Mike Williams TITLE Field Foreman DATE 3/29/90

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 6 1990