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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501
SEP 21 1984
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☐ Fee ☒
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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- XX - Salt Water Disposal Well	7. Unit Agreement Name
2. Name of Operator Anadarko Production Company	8. Farm or Lease Name Dagger Draw SWD
3. Address of Operator P. O. Drawer 130, Artesia, New Mexico 88210	9. Well No. 1
4. Location of Well UNIT LETTER E 1495 FEET FROM THE North LINE AND 225 FEET FROM THE West LINE, SECTION 22 TOWNSHIP 19S RANGE 25E NMPM.	10. Field and Pool, or Wildcat Dagger Draw Upper Penn., North
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 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 JOBS <input 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.

Anadarko received approval to drill this well as: Osage SWD #1.

Request is herewith made to change the name to: Dagger Draw SWD #1.

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

SIGNED *James A. Clements* TITLE Area Supervisor DATE September 20, 1984

APPROVED BY Leslie A. Clements TITLE Supervisor District II DATE SEP 25 1984

CONDITIONS OF APPROVAL, IF ANY:

Post FD-3
9-28-84
Chg Well Name