

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico, 87504-2088

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

WELL API NO.

30-015-27333

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

NM B-8326

7. Lease Name or Unit Agreement Name

Dickey Sullivan

8. Well No.

3

9. Pool name or Wildcat

Turkey Track 7R, Qn, GB, SA

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. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Anadarko Petroleum Corporation

3. Address of Operator

PO Box 130, Artesia, N. M. 88211-0130

4. Well Location

Unit Letter C : 660 Feet From The North Line and 1650 Feet From The West Line

Section

15

Township

19S

Range

29E

NMPM

Eddy

County

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

3351' GR

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: ☐

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.

1. MIRUPU. TOH with rods and tubing.
2. Set RBP above existing Queen perfs.
3. Perforate 7 Rivers pay zone from 1500-1592'.
4. Acidize and fracture treat.
5. Pull RBP and return to pump with both zones open.

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

SIGNATURE

Mike Braswell

TITLE Field Foreman

DATE 4-2-94

TYPE OR PRINT NAME

Mike Braswell

TELEPHONE NO. 677-2411

(This space for State Use)

SUPERVISOR DISTRICT II

APR 8 1994

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: