

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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IL CONSERVATION RECEIVED BY
P. O. BOX 2083
SANTA FE, NEW MEXICO 87501-1985
MAY 27 1985
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> For <input type="checkbox"/>
5. State Oil & Gas Lease No. B - 8326

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 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 Dickey Sullivan State
3. Address of Operator P. O. Drawer 130, Artesia, New Mexico 88210	9. Well No. 3
4. Location of well UNIT LETTER C 990 FEET FROM THE North LINE AND 1980 FEET FROM West LINE, SECTION 15 TOWNSHIP 19S RANGE 29E NMPM.	10. Field and Pool, or Wildcat Turkey Track-7 Rivers-Queen-Grayburg-SA
15. Elevation (Show whether DF, RT, GR, etc.) 3348.6' 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 <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"/>	OTHER <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.

Request 180 days extension on application for permit to drill this well.

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

SIGNED  TITLE Area Supervisor DATE May 24, 1985

APPROVED BY _____ TITLE _____ DATE MAY 31 1985
CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL SIGNED
BY LARRY BROCKS
GEOLOGIST - NMOC