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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
13-9683

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	ANDERSON RANCH UNIT
3. Address of Operator	8. Farm or Lease Name
P. O. Box 460, Hobbs, New Mexico 88240	ANDERSON RANCH UNIT
4. Location of Well	9. Well No.
UNIT LETTER <u>D</u> , <u>660</u> FEET FROM THE <u>NORTH</u> LINE AND <u>600</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>11</u> TOWNSHIP <u>16-S</u> RANGE <u>32-E</u> NMPM.	10. Field and Pool, or Wildcat
	WOLFCAMP
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	LEA

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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>SET SURFACE CASING</u> <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.

MIRU. SPUD @ 7:00 AM ON 10/20/83. DRILLED TO 495'. CIRC HOLE CLEAN. RAN 11 ITS OF 13 3/8" 48 # H-40 ST+C CASING SET @ 495'. CMT W/350 SXS CLASS "C" W/4% GEL. TAILED W/100 SXS CLASS "C" W/2% CaCl₂. CIRC CMT TO SURFACE. WOC.

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

SIGNED Jerry Sexton TITLE Administrative Supervisor DATE 10/24/83

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

OCT 25 1983

APPROVED BY _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: