

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-71

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.)

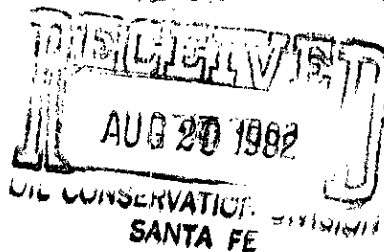
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Anadarko Production Company	8. Farm or Lease Name Mae Currie
3. Address of Operator P.O. Box 806 Eunice, New Mexico 88231	9. Well No. 2
4. Location of Well UNIT LETTER T 878 FEET FROM THE West LINE AND 2310 FEET FROM THE South LINE, SECTION 6 TOWNSHIP 21S RANGE 37E NMPM.	10. Field and Pool, or Wildcat Rivers Fumont Yates 7 Queen
15. Elevation (Show whether DF, RT, GR, etc.) 3510' GR	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 checked="" 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.

- TOH w/rods, pump & tbg.
- TIH w/bit. CO to 3800'.
- Run- Casing Inspection Log. Squeeze off hole if one exists.
- TIH w/bit. CO csg.
- TIH w/RBP & RTTS. Straddle perms 3664-67, 3675-81, 3684-88, 3698-3702, 3706-08. Acidize perms w/1000 gal of 15% NE Acid, 110 gals Scale Inhibitor, w/10 gals surfactant. Over flush w/100 bbls 2% KCL fluid. Straddle perms, 3594-97, 3605-13, 3624-34. Same treatment.
- TOH w/RBP & PKR.
- Swab back spent acid.
- TIH w/Production String. POP.



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

Original  
SIGNED by: Howard D. Hackett TITLE: Production-Foreman DATE: 8/3/82  
APPROVED BY: [Signature] TITLE: SUPERVISOR DISTRICT 1 DATE: AUG 16 1982  
CONDITIONS OF APPROVAL IF ANY: