

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
B-9953

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 N. Anderson Ranch Unit
2. Name of Operator H. L. Brown, Jr.	8. Farm or Lease Name N. Anderson Ranch
3. Address of Operator P. O. Box 2237, Midland, TX 79702	9. Well No. 5
4. Location of Well UNIT LETTER <u>I</u> <u>1980</u> FEET FROM THE <u>south</u> LINE AND <u>330</u> FEET FROM <u>east</u> LINE, SECTION <u>32</u> TOWNSHIP <u>15S</u> RANGE <u>32E</u> NMPM.	10. Field and Pool, or Wildcat N. Anderson Ranch Canyon Cisco
15. Elevation (Show whether DF, RT, GR, etc.) 4314'	12. County Lea

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <u>perforate and acidize</u> <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

4-19-85 Prep. to acidize. SION.
4-20-85 Swabbing. RU Halliburton & spot 500 gals. 15% NE-Fe. Well went on vacuum.
RU & swab. Made 17 runs. SION.
4-21-85 Swabbing.
4-22-85 Swabbing.
4-23-85 Made 10 swab runs. Run temp. svy. & pump in tracer. No channeling. RD.
4-24-85 SI. WO production equipment.
4-25/26-85 SI. WO production equipment.

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

SIGNED Jean Mills TITLE Production Clerk DATE 4-26-85

APPROVED BY _____ TITLE _____ DATE 2-19-85

CONDITIONS OF APPROVAL, IF ANY: