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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

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

SEP 12 10 01 AM '69

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator ANADARKO PRODUCTION COMPANY		5. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 247, Hobbs, New Mexico 88240		7. Unit Agreement Name
4. Location of Well UNIT LETTER P 330 FEET FROM THE South LINE AND 330 FEET FROM THE East LINE, SECTION 4 TOWNSHIP 22 S RANGE 37 E NMPM.		8. Farm or Lease Name R. L. Brunson Tr. 1
		9. Well No. 1
		10. Field and Pool, or Wildcat Penrose-Skelly
15. Elevation (Show whether DF, RT, GR, etc.) 3430' GR		12. County Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER **Install risers on casing strings** ☒

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.

1. Dug out old cellar to expose 10-3/4" surface casing;
2. Placed 1/8" steel pipe between 10-3/4" surface and 8-5/8" intermediate casing strings;
3. Prepare a bridge in 10-3/4" and filled to top of 10-3/4" with cement;
4. Connected 1" pipe into valve on 8-5/8" casing, brought riser to surface;
5. Installed valves at the surface on the 1/8" and 1" lines;
6. After the wells were checked by Mr. John Runyon, the cellar was refilled.

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

SIGNED Wm J. DeLeon TITLE District Superintendent DATE 9/9/69
APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT DATE SEP 10 1969
CONDITIONS OF APPROVAL, IF ANY: