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U.S.G.S.		
LAND OFFICE		
OPERATOR		

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 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 GAS WELL OTHER

2. Name of Operator
Anadarko Production Company

3. Address of Operator
P. O. Box 806 - Eunice, New Mexico 88231

4. Location of Well
UNIT LETTER **F** 1980 FEET FROM THE **North** LINE AND 1980 FEET FROM THE **West** LINE, SECTION **15** TOWNSHIP **22-S** RANGE **37-E** N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
N.A.

7. Unit Agreement Name
8. Farm or Lease Name
E. W. Walden

9. Well No.
2

10. Field and Pool, or Wildcat

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"/>	PLUG AND ABANDON <input checked="" 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 JOB <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.

1. RUPU
2. Run tbg. to top of shot hole @ 3625'
3. Pump cmt. in sufficient quantity to bring cmt. back into csg. @ 3597'
4. Load hole with salt gel mud
5. Spot 20 sk cmt plug @ 2500'
6. Spot 20 sk cmt plug @ 1200'
7. Spot 20 sk cmt plug @ 300'
8. Spot 20 sk cmt plug @ surface
9. Install dry hole marker
10. RDPU
11. Clean location for inspection

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

SIGNED Herb Anderson TITLE Area Supervisor DATE 03/01/76

APPROVED BY Jerry Serron TITLE Dist. Mgr. DATE 2 1976

CONDITIONS OF APPROVAL, IF ANY: