

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

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 ☐	7. Unit Agreement Name <u>Penrose</u> <u>Langlie Mattix Sand</u>
2. Name of Operator <u>Anadarko Production Company</u>	8. Farm or Lease Name <u>Tract 8</u>
3. Address of Operator <u>P.O. Box 806 Eunice, New Mexico 88231</u>	9. Well No. <u>3</u>
4. Location of Well UNIT LETTER <u>D</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>21</u> TOWNSHIP <u>22S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat <u>Langlie Mattix</u>
15. Elevation (Show whether DF, RT, CR, etc.) <u>3382' DF</u>	12. County <u>Lea</u>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☒	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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 & Reverse Unit. Pull rods & tbg.
2. TIH w/bit, DC & 2-7/8" tbg.
3. Clean out to TD of 3630'. TOH.
4. Acidize perms w/3000 gals of 15% NEFE.
5. Fracture treat perms w/60,000 gals gelled brine & 90,000# of 10/20 sand.
6. TIH w/rods & tbg. Place back on production.

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

SIGNED John C. English TITLE Area Supervisor DATE August 9, 1983
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR
APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

AUG 11 1983

RECEIVED
AUG 10 1983
CSC
HOBBS OFFICE