Submit 3 Copies
to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office					
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION  2040 S. Pacheco St. Sonta Fe NM 87505		WELL API NO. 30-025-10380		
Santa Fe, NM 87505			5. Indicate Type of Lea	ise	
P.O. Drawer DD, Artesia, NM 88210				STATE	FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lea	se 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"			7. Lease Name or Unit	Agreement Name	
(FORM (	C-101) FOR SUCH PROPOSALS.)			_	
1. Type of Well: OIL GAS WELL WELL	OTHER	WIW	LANGLIE- PENROSE	SAND UNIT	
2. Name of Operator			8. Well No.		
ANADARKO PETROLEU	8-1				
3. Address of Operator	9. Pool name or Wildcat				
P.O. BOX 2497, MIDLAN	LANGLIE-MATTIX SR QN GRBG				
4. Well Location Unit Letter $F$ : 1	980 Feet From The NORTH	Line and 1980	Feet From T	he <i>WEST</i>	Liı
Section 21	Township 22S	Range 37E	NMPM LEA		County
Section 21	10. Elevation (Show whether	<u> </u>	Turin Edit		
11 Charle	3363' GR Appropriate Box to Indicate Natu	ure of Natice Report or (	Other Data		
NOTICE OF INTER		_	SEQUENT REPOR	T OF:	
			-		
PERFORM REMEDIAL WORK PLUG AND ABANDONX REMEDIAL WORK			ALT	ERING CASING	<u></u>
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING O	PLU	IG AND ABANDON	IMENT
PULL OR ALTER CASING	NT JOB				
OTHER:		OTHER:			
12. Describe Proposed or Completed O work.) SEE RULE 1103.	perations (Clearly state all pertinent details,	and give pertinent dates, including e	stimated date of starting an	proposed	
3. STING INTO CMT 4. STING OUT OF CI 5. SPOT 25 SX @ BO 6. SET CMT RET @ 7. STING INTO CMT	3350' AND PERF @ 1250'. RET & PUMP 200 SX CLASS ( MT RET & DUMP 10 SX CMT C DTTOM OF SALT. (2450 - 2300 1200'. RET. PUMP 400 SX CLASS C CSG TO SURFACE.	ON CMT RET. ')	I CMT RET.		
I hereby certify that the information above	true and complete to the best of my knowledge	and belief.			
/ //s					
SIGNATURE 94		_ TITLEENGINEE	R	DATE 5/23	3/97
	M CIEDAR			THE PRIVATE NO	915/ 683 0565
	M. GASPAR			TELEPHONE NO.	683-0565
(This space for State Use) ORIGINAL:	SIGNED BY CHRIS WILLIAMS			****	A.B. 400
APPROVED BY	TRICT I SUPERVISOR	TITLE		DATE JUN	09 199



Subject	LMPSU- WELL PLUGGING (PHASE I.)	Page No.	Of
File	LMPSU 8-1	By Clay	Date 5/16/97

