Submit 3 Copies to Appropriate District Office

State of New Mexico gy, Minerals and Natural Resources Departme

Form C-103

Revised 1-1-89

DISTRICTI OIL CONSE	RVATION DIVISION	
P.O. Box 2088		WELL API NO. 3D-D25-10460
P.O. Drawer DD, Anesia, NM 88210	ew Mexico 87504-2088	5. Indicate Type of Lease
DISTRICT III 1000 Rio Brzzos Rd., Aziec, NM 87410		STATE FEE STATE FEE STATE STATE FEE STATE
SUNDEY NOTICES AND DEPORT	TO ON WITH O	
SUNDRY NOTICES AND REPORT (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OF DIFFERENT RESERVOR. USE "APPLICA"	R TO DEEPEN OR PLUG BACK TO A TON FOR PERMIT	7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROP 1. Type of Well:	USALS.)	Langlie Mattix Penrose
OIL WELL WELL OTH		Sand Unit Tract 18
2 traine of Operator		8. Well No.
Anadarko Petroleum Corporation 3. Address of Operator	on	1
P.O. Box 806 Eunice, NM 8823	31	9. Pool name or Wildcat Langlie-Mattix SR, QN, GB
4. Well Letter M : 890 Feet From The	South Line and 330	T-7 1
26 229		Feet From The West Line Lea
Section Township		NMPM County
11. Check Appropriate Box to	Indicate Nature of Notice, Re	port, or Other Data
NOTICE OF INTENTION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABAN	DON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING	= =
PULL OR ALTER CASING	CASING TEST AND CEI	
OTHER:		
12 Parrie Parrie Control		
12. 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. MIRUPU TOH w/ rods & pump laying down. TOH w/ 2 3/8" tbg & 2 3/8 X 7" T. A. C. standback.		
2. RU Halliburton Services & wibail 6 sacks Class H cement ended 2 3/8" tbg 103 jts to 15 gals packer fluid. Close Held fine. TOH w/ 2 3/8" tb bullplug in well head & flan	on top of CIBP for 3170' & circulate BOP. Pressure up	30' plug. TIH w/ open 130 Bbls 2% KCL w/
	This Approval of Tem Abandenment Expires	porary 3-1-59-
I hereby certify that the information above is true and complete to the best of my	knowledge and being.	
SIGNATURE C. English	Area Super	rvisor 2-28-94
TYPE OR PRINT NAME	·	TELEPHONE NO.
(Time space for State Use)		
APPROVED BY	ORIGINAL SIGNED B	Y JERRY SEXTON DATE MAR 0 4 1994
CONDITIONS OF APPROVAL, IF ANY:	TITLE DISTRICT I SU	PERVISOR DATE