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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 16 11 55 AM '67

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

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name Langlie
2. Name of Operator Anadarko Production Company	8. Farm or Lease Name Mattix Penrose Sand Unit
3. Address of Operator P. O. Box 247, Hobbs, New Mexico 88240	9. Well No. 2
4. Location of Well UNIT LETTER L , 1980' FEET FROM THE South LINE AND 330' FEET FROM THE West LINE, SECTION 26 TOWNSHIP 22S RANGE 37E NMPM.	10. Field and Pool, or Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 3322' GR	12. County Lea

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 type="checkbox"/>	REMEDIAL WORK <input checked="" 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. Cleaned out to total depth using cable tools.
2. Ran Gamma Ray-Neutron and caliper logs.
3. Ran 2 3/8" cement lined tubing with a Johnston Model 101-S tension packer.
4. Set packer at approximately 3300' in casing.
5. Will place well on water injection status by or before 9/1/67 under OCC Order No. WFX 261.

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

SIGNED M. J. Nelson TITLE District Superintendent DATE 8/10/67

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____