DISTRIBUTION SANTA FE	NTA FE NEW MEXICO OIL CONSERVATION COMMISSION		
FILE	<del></del>		5a. Indicate Type of Lease
U.S.G.S.			State Fee. X
	-+		5. State Oil & Gas Lease No.
OPERATOR			
(DO NOT USE THIS FORM	UNDRY NOTICES AN	ND REPORTS ON WELLS R TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. (FORM C-101) FOR SUCH PROPOSALS.)	
1. OIL X GAS WELL WELL	OTHER.		7. Unit Agreement Name Langile Mattix Penrose Sand Unit
2. Name of Operator			8. Farm or Lease Name
ANADARKO PRODUCTI	Tract No. 28		
3. Address of Operator			9. Well No.
P. 0. Box 247, Ho	bbs. New Mexico	88240	5
		00210	
4. Location of Well			10. Field and Pool, or Wildcat
4. Location of Well M			10. Field and Pool, or Wildcat
4. Location of Well M UNIT LETTER	330 FEET FR	South         990           ROM THE	10. Field and Pool, or Wildcat Langlie Mattix
4. Location of Well M UNIT LETTER	330 	ROM THE South 990 F	10. Field and Pool, or Wildcat Langlie Mattix
4. Location of Well M UNIT LETTER	330 FEET FR SECTION 28	South         990           ROM THE	Langlie Mattix
4. Location of Well UNIT LETTER	330 FEET FR Section 28 15. Ele Not	South 990 ROM THE South LINE AND 990 TOWNSHIP 22 S RANGE 37 E Evention (Show whether DF, RT, GR, etc.) t available ox To Indicate Nature of Notice, Report	IO. Field and Pool, or Wildcat Langlie Mattix NMPM.
4. Location of Well UNIT LETTER	330 FEET FR 28 15. Ele Not heck Appropriate Bo OF INTENTION TO:	South 990 ROM THE South LINE AND 990 TOWNSHIP 22 S RANGE 37 E Evention (Show whether DF, RT, GR, etc.) t available ox To Indicate Nature of Notice, Report	I. Field and Pool, or Wildcat Langlie Mattix NMPM. 12. County Lea t or Other Data
4. Location of Well UNIT LETTER	330 FEET FR 28 15. Ele Not heck Appropriate Bo OF INTENTION TO:	South 990 ROM THE SOUTH LINE AND 990 TOWNSHIP 22 S RANGE 37 E EVALUATION (Show whether DF, RT, GR, etc.) T available Ox To Indicate Nature of Notice, Report SUBSE	IO. Field and Pool, or Wildcat Langlie Mattix NMPM. 12. County Lea t or Other Data CQUENT REPORT OF:
4. Location of Well UNIT LETTER	28 SECTION 28 SECTION 15. Ele Not heck Appropriate Bo OFF INTENTION TO:	South     990       ROM THE     22 S     37 E	Lea ALTERING CASING PLUG AND ABANDONMENT
4. Location of Well UNIT LETTER THELINE 16. CL NOTICE PERFORM REMEDIAL WORK TEMPORARILY ABANDON	28 SECTION 28 SECTION 15. Ele Not heck Appropriate Bo OFF INTENTION TO:	South 990 ROM THE SOUTH LINE AND 990 TOWNSHIP 22 S 37 E Evation (Show whether DF, RT, CR, etc.) t available Township SUBSE LUG AND ABANDON REMED AL WORK COMMENCE DRILLING OPNS.	

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. Moved in well servicing unit 1/19/70. Pulled tubing and rods.
- 2. Run 3640' of 4 1/2" 10.50 pipe with a packer to fracture treat.
- 3. Started fracture treatment using 9# brhe gelled with 60# gelling agent per 1000 gallons with | 1/2# 10/20 SPG. Treated at 33 BPM & 2300 psi for 15,000 gallons. Screened out. Reversed out sand, picked 4 1/2" up to 3500' & continued job. Total treatment 50,000 gal. gelled brine & 59,000# 10/20 sand. Av. rate 33.3 BFM at 2350 to 2850 psi. ISDP 1775#.
- Shut down for gel to break & pressure bleed off.
   Pulled 4 1/2" frac tubing & reran 2 3/8" tubing, rods & pump.
- 6. Placed well on production 1/27/70.

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

staned )) )) )) )) ) ) )	TITLE	District Superintendent	DATE_	1/29/70
APPROVED BY APPROVAL, IF ANY:	TITLE		DATE _	· · · · · · · · · · · · · · · · · · ·