Form 3160-5 (June 1990)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N.M. Oil Cr P. 1980

Hob NM 8824

FORM APPROVED
Budget Bureau No. 1004-0115
Expires: March 31, 1993

SVLene Designation and Serial No.

SUBA	FOR PERMIT—" for such proposals BUREAU OR ROSWE	Langie Mattix Penrose
1. Type of Well		Sand Unit
Well Gas Wolfer Wa	ter Injection	8. Well Name and No.
2. Name of Operator		LMPSU 39-1
Anadarko Petroleum Cor	p.	9. API Well No.
3. Address and Telephone No. P.O. Box 2497, Midland	, TX 79702 915/683-0534	30-025-10513  10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Surve		Langlie Mattix SR/QN
Unit Letter P, 960' FS		11. County or Parish, State GRBG
Sec 29, T-22S, R-37E		•
		Lea
2. CHECK APPROPRIATE BO	DX(s) TO INDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA
TYPE OF SUBMISSION	* TYPE OF ACTI	ION
Notice of Intent	X Abandonment	Change of Plans
Control of the contro	Recompletion	New Construction
Subsequent Report	. Mugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Cusing	Conversion to Injection
	Lij Other	Dispose Water   Onto: Report results of multiple completion on Well
	ate all pertinent details, and give pertinent dates, including estimated date of s	Completion or Recompletion Report and Log form.) starting any proposed work. If well is directionally drilled,
give subsurface locations and measured and true	vertical depths for all markers and zones pertinent to this work.)*	
1) Release pkr & TOH	w/tba.	
	' & perf @ 1250' & 175'.	
	& pump 150 sx Class "C" cmt.	
	et & dump 10 sx cmt on cmt ret.	TAG
5) Spot 25 sx @ botto		
6) Set cmt ret @ 1200 7) Sting into cmt ret	. Pump 100 sx Class "C" cmt. Du	umn 10 sy on cmt ret
	to top perfs & circ to surf.	mp 10 by on one 100.
9) Fill remaining csq		
10) Set P&A marker.		REC INN JUL HOBBS.
		BS.
	SEE ATTACHED FOR	
	CONDITIONS OF APPROVAL	HE H
		€
14 I brook and 6/km sheet and and arrest		ma m
14. I hereby certify that the foregoing is take and correct		7/16/97
Signed Si	Pra Sear <sub>se</sub> Technical Assistant	7/16/97
Signed Si	Pra Sear <sub>se</sub> Technical Assistant	7/16/97

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Submit 3 Copies to Appropriate District Office

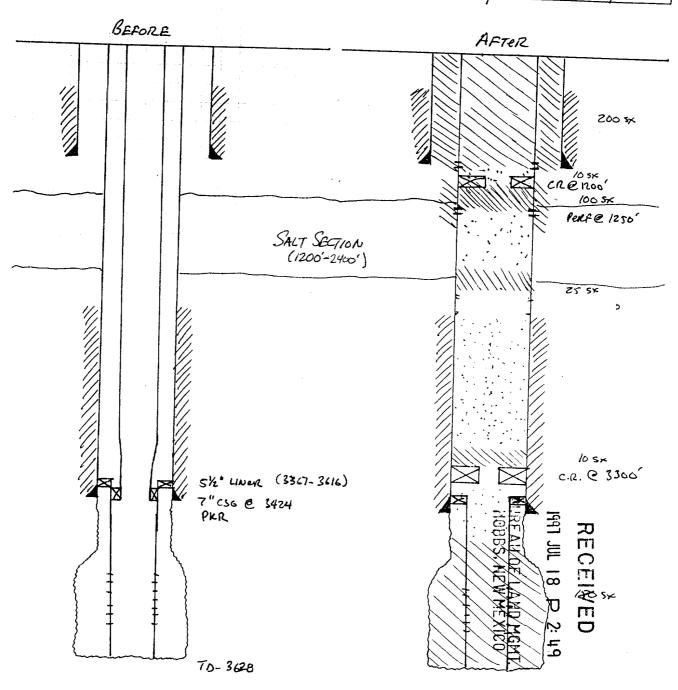
## State of New Mexico Energy, aerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240  DISTRICT II P.O. Drawer DD, Artesia, NM 88210	2040 S. Pacheco St. Santa Fe, NM 87505		WELL API NO. 30-025- 5. Indicate Type of Lease	.10513	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease N	STATE FEE X	
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESER	S AND REPORTS ON WELLS  POSALS TO DRILL OR TO DEEPEN C  VOIR. USE "APPLICATION FOR I  )1) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agr	eement Name	
1. Type of Well:  OIL GAS WELL WELL	отнек	WIW	LANGLIE-MA PENROSE SA		
2. Name of Operator			8. Well No.		
ANADARKO PETROLEUM	CORP.		39-1		
3. Address of Operator			9. Pool name or Wildcat		
P.O. BOX 2497, MIDLAND, 4. Well Location	TX 79702		LANGLIE-MA	TTIX SR QN GRBG	
	Feet From The SOUTH	Line and330	Feet From The	<i>EAST</i> Li	ine
Section 29	Township 22S		NMPM LEA	County	,,,,,
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)			
	propriate Box to Indicate Natu	/			200
NOTICE OF INTENTI	ON TO:	SUBS	EQUENT REPORT (	OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON X	REMEDIAL WORK	ALTERIN	NG CASING	]
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OF	PNS. PLUG A	ND ABANDONMENT	]
PULL OR ALTER CASING		CASING TEST AND CEMEN	т јов		
OTHER:		OTHER:			7
12. Describe Proposed or Completed Operation	tions (Clearly state all pertinent details,	and give pertinent dates, including esti			
RLS PKR & TOH W/TBG.  SET CMT RET @ 3300' AND PERF @ 1250' & 175'.  STING INTO CMT RET & PUMP 150 SX CLASS C CMT.  STING OUT OF CMT RET & DUMP 10 SX CMT ON CMT RET.  SPOT 25 SX @ BOTTOM OF SALT.  SET CMT RET @ 1200'.  STING INTO CMT RET. PUMP 100 SX CLASS C CMT. DUMP 10 SX ON CMT RET.					
7. STING INTO CMT RE 8. PUMP 200 SX CMT II 9. FILL REMAINING CS 10. SET P&A MARKER.	NTO TOP PERFS & CIRC TO	SURF.	EAU OF LAND I	RECEIVEI	
I hereby certify that the information above is true	and complete to the best of my knowledge	and belief.	ටු කි	÷ 0	
SIGNATURE	and	TITLE ENGINEER	DA'	<b>-0</b>	
TYPE OR PRINT NAME CLAY M. (	GASPAR		те	915/ LEPHONE NO. 683-0565	
(This space for State Use) OPICINAL OF					=
UnidiNAL SI	GNED BY CHRIS WILLIAMS RICT I SUPERVISOR	TITER	DAG	JUN 0 9 1997	



Subject	LMPSU - WELL PLUSGING (PHASE I.)	Page No.	Of
File	LMPsv 39-1	By Class	Date 5/14/97
		- Cury	3//6/97



Submit 3 Copies
to Appropriate
District Office

CONDITIONS OF APPROVAL, IF ANY:

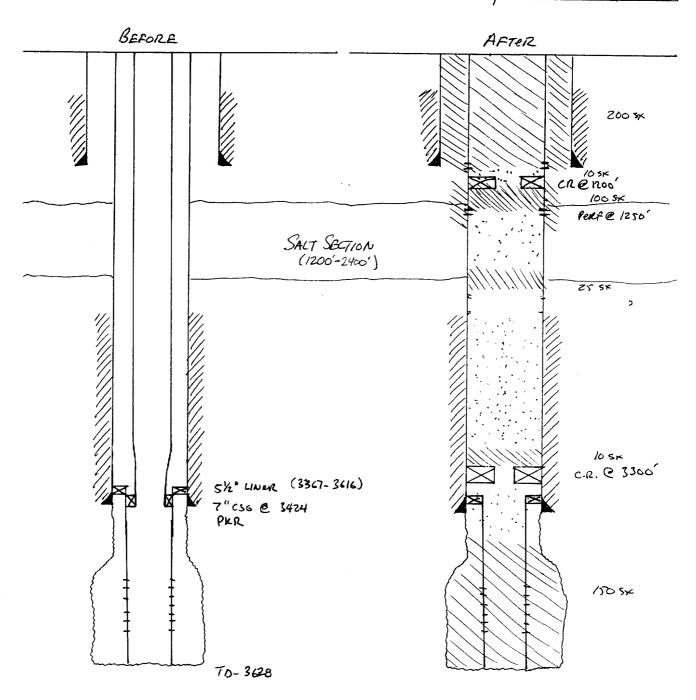
## State of New Mexico Chergy Ainerals and Natural Resources Department

Form C-103 Revised 1-1-89

to Appropriate  District Office	Energy, Amerals and Natur	ai Resources Department		Revised	1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240			1	25-10513	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, NM 87505		5. Indicate Type of Lo		DOD V
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Le	STATEase No.	FEE LX
(DO NOT USE THIS FORM FOR PRODIFFERENT RESERV	AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN O /OIR. USE "APPLICATION FOR F 1) FOR SUCH PROPOSALS.)		7. Lease Name or Uni	t Agreement Name	
1. Type of Well: OIL GAS WELL WELL WELL	OTHER	WIW	LANGLIE- PENROSE	-MATTIX SAND UNIT	
2. Name of Operator			8. Well No.		
ANADARKO PETROLEUM	CORP.		39-1		
3. Address of Operator			9. Pool name or Wilde	cat	
P.O. BOX 2497, MIDLAND,	TX 79702		LANGLIE-	MATTIX SR QN	GRBG
4. Well Location Unit Letter P: 980	Feet From The SOUTH	Line and	Feet From 7	The <u>EAST</u>	Line
Section 29	Township 22S	Range 37E	NMPM LEA		County
South 27	10. Elevation (Show whether				County
11. Check App  NOTICE OF INTENTIO	oropriate Box to Indicate Natu	· ·	Other Data EQUENT REPOR	OT OE.	
			-		
PERFORM REMEDIAL WORK	PLUG AND ABANDON X	REMEDIAL WORK	AL1	ERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING O	PNS. PLU	JG AND ABANDON	NMENT
PULL OR ALTER CASING		CASING TEST AND CEMEN	NT JOB		
OTHER:		OTHER:			
12. Describe Proposed or Completed Operat work.) SEE RULE 1103.	ions (Clearly state all pertinent details,	and give pertinent dates, including es	fimated date of starting an	y proposed	
3. STING INTO CMT RE 4. STING OUT OF CMT 5. SPOT 25 SX @ BOTT 6. SET CMT RET @ 120 7. STING INTO CMT RE	10' AND PERF @ 1250' & 17 T & PUMP 150 SX CLASS C RET & DUMP 10 SX CMT O 'OM OF SALT. 10'. T. PUMP 100 SX CLASS C NTO TOP PERFS & CIRC TO	C CMT. N CMT RET. CMT. DUMP 10 SX ON	CMT RET.		
I hereby certify that the information above is true	and complete to the best of my knowledge	and belief.			
	and the same of th				
SIGNATURE	44C)	TITLE ENGINEER	<u> </u>	DATE 5/23	3/97
TYPE OR PRINT NAME CLAY M. C	GASPAR			TELEPHONE NO.	915/ 683-0565
(This space for State Use) OBIGINAL SIG	GNED BY CHRIS WILLIAMS				
APPROVED BY DASTA	RIGT I SUPERVISOR	TITLE		DATE HIS	09 1937



Subject	LMPSU - WELL PLUSGING (PHASE I.)	Page No.	Of
File	LMPsv 39-1	By Clay	Date 5/16/47



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U.S.G.S.		Ĺ		
LAND OFFICE			<u> </u>	
TRANSPORTER GAS		I		
			İ	
OPERATOR			<u> </u>	
PROPATION OF	FICE	1	1	

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C -104 Supersedes Old C-104 and C-11 Effective 1-1-65

U.S.G.S.  LAND OFFICE  TRANSPORTER  OIL  GAS  OPERATOR	ANSPORT OIL AND NATURAL GAS	
PROFATION OFFICE		
Anadarko Petroleum Corporation		
P. O. Box 2497 Midland, Texas 79702	Other (Please explain)	
Reason(s) for filing (Check proper box)  New We!!  Change in Transporter of:	Change in Ownership Effective:	
Recompletion CII Dry C Change in Ownership X Casinghead Gas Cond	lensole AUG 1 1985	<u>.</u>
If change of ownership give name Anadarko Production Com	pany, P. O. Box 2497, Midland, Texas 79702	2
and aggress of previous own.		
II. DESCRIPTION OF WELL AND LEASE    Vell No.   Pool Name, Including   Lease Name	_ , LC	8626-B
Location		
Unit Letter P: 980 Feet From The South L	_	
Line of Section 29 Township 22S Range	37Е , ммрм, Lea	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL C	Aggress (Give address to which approved copy of this form is to be s	sent)
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be s	sent)
If well produces oil or liquids, give location of tanks.  Unit   Sec.   Twp.   P.ge.	is gas actually connected? When	
If this production is commingled with that from any other lease or poo	al, give commingling order number:	
Designate Type of Completion - (X)  Gas Well	New Well Workover Deepen Plug Back Same Resty. D	Diff. Res'▼.
Date Spudded Date Compl. Ready to Prod.	Total Depth P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.,   Name of Producing Formation	Top Oil/Gas Pay Tubing Depth	
Elevations (DF, AAB, A7, GA, etc.)	Depth Casing Shoe	
Perforations	The second secon	
TUBING, CASING, A HOLE SIZE CASING & TUBING SIZE	ND CEMENTING RECORD  DEPTH SET  SACKS CEMENT	Г
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be able for this	e after recovery of total volume of load oil and must be equal to or exceed depth or be for full 24 hours)	id top allow
OIL WELL Date First New Cil Run To Tanks Date of Test	Freducing Method (Flow, pump, gas lift, etc.)	
Length of Test Tubing Pressure	Casing Pressure Choke Size	
Actual Pred. During Test Oil-Bbis.	Water-Bbls. Gas-MCF	
GAS WELL  Actual Frod. Test-MCF/D  Length of Test	Bbis. Condensate/MMCF Gravity of Condensate	
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in) Choke Size	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation gives	APPROVED AUG 2 1 1985 . 19.  ORIGINAL SIGNED BY JERRY SEXTON  BY DISTRICT I SUPERVISOR	
Commission have been complied with and that the best of my knowledge and believe above is true and complete to the best of my knowledge and believe above is true and complete to the best of my knowledge and believe above is true and complete to the best of my knowledge and believe above is true.	TITLE	
This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deel well, this form must be accompanied by a tabulation of the device.		
••••		
Senior Administrative Specialist  (Title)	All sections of this form must be filled out completel able on new and recompleted walls.  Fill out only Sections I. II. III. and VI for change well name or number, or transporter, or other such change or well name or number.	ly for allow

DETAILUTION  STATE   NEW MEXICO DIL CONSERVATION COMMISSION  SUBSTRUCTION  STATE   STA	NO. OF COPIES RECEIVED		Form C-103		
THE U.S.G.S.  LAND OFFICE OPERATOR  SUNDRY NOTICES AND REPORTS ON WELLS  DO NOT JUST THIS TORN LAND SERVED TO GROW THE STATE OF THE STA	DISTRIBUTION				
Sa. Indicate Type of Lance   Sate	ANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION			
SANDER NOTICES AND REPORTS ON WELLS  Compared to the control of th	FILE				
SubDRY NOTICES AND REPORTS ON WELLS  TO NOT THE THIS TOTAL PARTY AND THE PORTS ON WELLS  TO NOT THE THIS TOTAL PARTY AND THE PROVIDED AND REPORTS ON WELLS  TO NOT THE THIS TOTAL PARTY AND THE PORTS ON WELLS  TO NOT THE THIS TOTAL PARTY AND THE PORTS ON WELLS  TO NOT THE THIS TOTAL PARTY AND THE PORTS ON WELLS  TO NOT THE THIS TOTAL PARTY AND THE PORTS ON WELLS  TO NOT THE THIS TOTAL PARTY AND THE PORTS ON WELLS  TO NOT THE THIS TOTAL PARTY AND THE PORTS ON WELLS  TO NOTICE OF INTENTION TO:  PERFORM BENEFICIAL WORK  TO NOTICE OF INTENTION TO:  PERFORM BENEFICATION TO:  PERFORM	U.S.G.S.		5a. Indicate Type of Lease		
SUNDRY NOTICES AND REPORTS ON WELLS    Common   Company   Common   Common   Common   Company   Common   Company   Common   Commo	LAND OFFICE		State A Chal Fee		
SUNDRY NOTICES AND REPORTS ON WELLS  ON STATE OF THE PROPERTY OF PROPERTY OF THE PROPERTY OF T	OPERATOR				
The county of th			LC-058626-B		
2. Name of Operator  2. Name of Operator  Anadarko Production Company  3. Address of Generator  Anadarko Production Company  3. Address of Generator  P. O. Box 806, Eunice, New Mexico 88231  4. Location of Well  South Listed P. O. Box 806, Eunice New Mexico 88231  4. Location of Well  South Listed P. O. Box 806, Eunice New Mexico 88231  10. Field and Pool, or Wildows  Listed P. O. Box 806, Eunice Report Test South Line AND 10. Field and Pool, or Wildows  Listed P. O. Box 806, Eunice Report Test South Line AND 10. Field and Pool, or Wildows  Listed P. O. Box 806, Eunice Report Test South Line AND 10. Field and Pool, or Wildows  Line East Line, Section 29 Township 22 Large 37  N. A. Lea  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report OF.  N. A. Lea  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report OF.  N. A. Lea  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report OF.  N. A. Lea  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report OF.  Pour AND ALEXANDON DESCRIPTION TO:  South Listed Well  ALEXANDON DESCRIPTION OF SUBSEQUENT REPORT OF.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test And Cashot Section 10. No. Language Subsequent Report Of.  Cashot Test Moth No. 39  List Elevation 10. No. Language Subsequent Report Of.  Cashot Test Moth No. 39  List Cashot No. 10. Language Subsequent Report No. 10. Provided Subsequent Report No. 1	SUNDR	Y NOTICES AND REPORTS ON WELLS PASALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ON FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)			
Anadarko Production Company  3. Addesse of Operator  P. O. Box 806, Eunice, New Mexico 88231  4. Location at Well  Unit Letter P 980  Feet From the South 15 South 16 Ano 330  Langlie Mattix  The East 16 Section 29 Township 22 SANGE 37 NOTE:  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  REFERM RELIEDIAL WORK 15 CASING 15 CHARGE TEAMS 16 CHARGE	OIL GAS WELL WELL	OTHER- Injection Well	Penrose Sand Unit		
P. O. Box 806, Eunice, New Mexico 88231  4. Location of Well  4. Location of Well  4. Location of Well  5. Elevation (Show whether OF, RT, GR, etc.)  10. Field and Pool, of Wildcord Langlite Mattix  11. East Line, section 29 Township 22 Ranks 37 NAME.  12. Conny  13. Elevation (Show whether OF, RT, GR, etc.)  14. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  8. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Repor	Anadarko Producti	on Company	1		
18. Clearly that the information above is true and complete to the best of my knowledge and belief.  10. Fleet me Pool, or Village Langile Mattix  11. Libreby certify that the information above is true and complete to the best of my knowledge and belief.		00001	1		
UNIT LETTER P 980 TELT FROM THE SOUTH LINE AND THE FET FROM THE EAST LINE, SECTION 29 TOWNSHIP 22 RANGE 37 NAME.  15. Elevation (Show whether UF, RT, GR, etc.)  15. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of:  SUBSEQUENT REPORT OF:  SCHEDIAL WORK  TEMPORABLITY ADAPTION  TOWNSHIP ROLL OF ALTER CASING  CHANGE FLANS  CHANGE FLANS  TOWNSHIP ROLL OF ALTER CASING  CHANGE FLANS  TOWNSHIP ROLL OF ALTER CASING  CHANGE FLANS  TOWNSHIP ROLL OF ALTER CASING  TOWNSHIP ROLL OF ALTER CA		nice, New Mexico, 00431			
15. Elevation (Show whether OF, RT, GR, etc.)   12. County   12. County   13. Elevation (Show whether OF, RT, GR, etc.)   12. County   14. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:    PERFORM REMEDIAL WORK	9	980 FEET FROM THE SOUTH LINE AND 330	Langlie Mattix		
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  OTHER  17. Deacribe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) see Rule 1109.  1. Cellars were dug out for casing pressure checks.  2. Connections were added to the surface casing and valves were raised to ground level.  18. I hereby certly; that the information above is true and complete to the best of my knowledge and belief.	THE East LINE, SECTION	29 TOWNSHIP 22 RANGE 37			
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  CHANGE SLAND  CHANGE SLA					
	Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  TEMPORARILY ABANDON PULL OR ALTER CASING  OTHER  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. Cellars were dug out for casing pressure checks. 2. Connections were added to the surface casing and valves were				
SIGNED Alenderson TITLE Area Supervisor DATE 3-18-75	18. I hereby certify that the information	above is true and complete to the best of my knowledge and belief.			
	SIGNED Alender	Area Supervisor	DATE 3-18-75		

APPROVED BY ACTION OF APPROVAL, IF ANY:

DATE