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# NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input 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 - 1" (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 <b>Langlie Mattix</b>
2. Name of Operator <b>Anadarko Production Company</b>		8. Farm or Lease Name <b>Penrose Sand Unit</b>
3. Address of Operator <b>Box 806, Eunice, New Mexico</b>		9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>I</b> <b>330</b> FEET FROM THE <b>East</b> LINE AND <b>1670</b> FEET FROM THE <b>South</b> LINE, SECTION <b>29</b> TOWNSHIP <b>22S</b> RANGE <b>37E</b> NMPM.		10. Field and Pool, or Wildcat <b>Langlie Mattix</b>
11. Elevation (Show whether DF, RT, GR, etc.) <b>NA</b>		12. County <b>Lea</b>

16. 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 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 <b>Bring csg. valves to ground</b> <input checked="" type="checkbox"/>
		<b>level.</b>	

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.

- Cellars were dug out for casing pressure check.
- Connections were added to the surface and intermediate casing and valves were raised to ground level.

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

SIGNED _____	TITLE <b>Area Supervisor</b>	DATE <b>3-18-75</b>
APPROVED BY <b>Nathan E. Kegg</b>	TITLE <b>Chief Supervisor</b>	DATE <b>3-18-75</b>
CONDITIONS OF APPROVAL, IF ANY:		