NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE Supersedes Old C-102 and C-103 Effective 1-1-65 Sa. Indicate Type of Lease			Form C-103
NEW MEXICO OIL CONSERVATION COMMISSION File	NO. OF COPIES RECEIVED		Supersedes Old
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Andarko Production Company 1. Address of Operator P. O. Box 247, Hobbs, NM 88240 2. Location of Well UNIT LETTER South LINE, SECTION 29 TOWNSHIP 228 RANGE 37E NAPPM. 15. Elevation (Show whether DF, RT, GR, etc.) Not available 16. 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 proping of the proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proping of the proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proping or the proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proping or the proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proping or the proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proping or the proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proping or the pertinent dates of	OPERATOR		
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Anadarko Production Company 5. Address of Operator P. O. Box 247, Hobbs, NM 88240 4. Location of Well UNIT LETTER South LINE, SECTION 10. FIELD FROM THE LINE AND 10. FIELD FROM LINE, SECTION 29 TOWNSHIP 228 RANGE 37E NMPM. 12. County Lea 13. 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 propulation of the purpose of completed Operations unit and clean out to T. D. of 3678' 3. Run 4½" frast tubing to 3670' with packer at 3350'. Fracture treat using 60,000 gallons gelled 9# brine with 110,000# sand, staged in for			
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South South 29 TOWNSHIP 228 RANGE 37E NMPM.			
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4. Fracture treat using 60,000 gallons gelled 9# brine with 110,000# sand, staged in fo	3. Run 44" frac tu	ibing to 3670' with packer at 3350'.	
	4. Fracture treat	using 60,000 gallons gelled 9# brine with 110,0	00# sand, staged in fou

6. Place well back on production.

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	relate to the hest of my knowledge and belief.	
18. I hereby certify that the information above is true and con		30.20-20
SIGNED management	District Superintendent	10-29-70
	TOLDING OF THE THE	***
		1070
APPROVED BY	TITLE -UPERVICE SITES TO	DATE 1970
CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE

OIL CONSERVATION COMM.