		the second se								
	DISTRIBUTION SANTA FE		ONSERVATION COMMISSION FOR ALLOWABLE AND	Form C +104 Superaedes Old C+104 and C+11 Effective 1+1+65						
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS									
1.	DPERATOR DPE									
	Anadarko Petroleum Corporation									
	P. O. Box 2497	idland, Texas 79702	Other (Please explain)							
	Reason(s) for liling (Check proper box) New Wett	Change in Transporter of:	Change in Ownersh	ip Effective:						
	Recompletion Change in Ownership X	Cil Dry Ga Caxinghead Gas Conden		1985 ·						
	If change of ownership give name and address of previous owner	Anadarko Production Comp	any, P. O. Box 2497, Mid	land, Texas 79702						
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including P								
	LMPSU Tract 36	4 Langlie-Mattin	x SR, Qn, Grbg State, Federal							
	Unit Letter <u>H</u> : 2310)Feet From TheNorthLin	e and Feet From T	he						
	Line of Section 34 Tow	mship 22S Range	37Е , NMPM, Lea	County						
111.	DESIGNATION OF TRANSPORT	CER OF OIL AND NATURAL GA	Address (Give douless to which approv	ed copy of this form is to be sent)						
	Nome of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approv	ed copy of this form is to be sent)						
	If well produces oil or liquida, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	n						
IV.	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res*v.						
	Designate Type of Completio	n = (X)	Total Depth	P.B.T.D.						
	Date Spudded	Date Compl. Ready to Prod.		Tubing Depth						
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	1						
	Perforations Depth Casing Shoe									
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT						
	,									
v.	TEST DATA AND REQUEST FO OIL WELL	DR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil o epth or be for full 24 hours) Producing Method (Flow, pump, gas lif							
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size						
	Actual Pred. During Test	Cil-Bbis.	Water-Bbls.	Gas-MCF						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
	Teating Method (pirot, back pr.)	Tubing Freessure (Shut-in)	Casing Pressure (Shut-in)	Choke Size						
			OIL CONSERVA	TION COMMISSION						
VI.	CERTIFICATE OF COMPLIAN		AUG 2 110	985, 19						
		regulations of the Oil Conservation with and that the information given best of my knowledge and belief.	BY ORIGINAL SIGNED BY JERRY SEXTON							
	AD. D		This form is to be filed in a	compliance with RULE 1104.						
		(AMOLO	If this is a request for allowable for a newly drilled or desperse well, this form must be accompanied by a tabulation of the deviative tests taken on the well in accordance with AULE 111. All sections of this form must be filled out completely for allow able on new and recompleted wells.							
	Senior Administrative	Specialist								
	July 24, 1985		Fill out only Sections I, I	I, III, and VI for changes of owner ter, or other such change of condition t be filed for each pool in multipl						
			envirtered wells.							

vo. or cortes receives Perm C-103 DISTRIBUTION					4		
OISTRIBUTION ANTA FE ANTA FE ANTA FE ANTA FE IANTA FE ANTA FE ANTA FE ANTA FE ANTA FE US.G.S.S. ANTA FE ANTA FE ANTA FE ANTA FE US.G.S.S. AND OFFICE AND OFFICE AND OFFICE AND OFFICE AND OFFICE OPERATOR ANT DOFFICE AND OFFICE AND OFFICE AND OFFICE AND OFFICE OPERATOR AND OFFICE AND OFFICE AND OFFICE AND OFFICE AND OFFICE OPERATOR AND OFFICE AND OFFICE AND OFFICE AND OFFICE AND OFFICE OPERATOR AND OFFICE AND OFFICE AND OFFICE AND OFFICE AND OFFICE AND OFFICE <td>NO. OF COPIES RECEIVED</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	NO. OF COPIES RECEIVED						
ANTA FE NEW MEXICO OIL CONSERVATION COMMISSION Effective 14-65 FILE	DISTRIBUTION						
U.S.G.S.	JANTA FE	NEV	MEXICO OIL CONSI	ERVATION COMMIS	SION		
U.S.G.S.	FILE						
LAND OFFICE	U.S.G.S.					5a. Indicate Type o	
OPERATOR SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FOR PROPORTS TO BUTCH FOR TO BUTCH TO BUTCH REPORT RESERVOIR. 1. OPERATOR Anadarko Production Company Tract 36 9. Well No. Tract 36 9. Well No. Inter Mexico 88231 Inter Mexico 88231 Inter Mexico 9000 Tract 36 Inter Mexico 100 UNIT OF Setter FROM THE Mexico 88231 Interererererere	LAND OFFICE					State	Fee X
1. 0.8 C ** APPLICATION FOR PERMIT -** (FORM C-101) FOR SUCH PROPOSALS.) 7. Unit Agreement Name	OPERATOR					5, State Oil & Gas	Lease No.
1. 0.8 C ** APPLICATION FOR PERMIT -** (FORM C-101) FOR SUCH PROPOSALS.) 7. Unit Agreement Name							
Image: Contract of Contract Injection Well Pentossising is and thit pentossis of Operator 2. Name of Operator 8. Form or Lease Name Address of Operator 9. Well No. 3. Address of Operator 9. Well No. Box 806, Eunice, New Mexico 88231 4. Location of Well 10. Field and Pool, or Wildcat UNIT LETTER H 2310 Feet FROM THE West Construct 10. Field and Pool, or Wildcat Langlie Mattix The East Line, section 34 The East Line, section 34 The Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Notice of INTENTION TO: SUBSEQUENT REPORT OF: Perform Remetal work Alterning casing Temporality Abandon Plug And Abandon Pull or Alter casing Change plans Other Baing Contest and center Job Pull or Alter casing Plug And Abandon Remetal Were Alterning casing Pull or Alter casing Change plans Other Bring Csg. Valves to ground	(DO NOT USE THIS FORM F	UNDRY NOTICES	AND REPORTS ON OR TO DEEPEN OR PLUG B. (FORM C-101) FOR SUC	WELLS ACK TO A DIFFERENT RE H PROPOSALS.)	SERVOIR.		
2. Name of Operator 8. Farm or Lease Name Anadarko Production Company Tract 36 3. Address of Operator 9. Well No. Box 806, Eunice, New Mexico 88231 4. Location of Well 10. Field and Pool, or Wildcat UNIT LETTER H 23.0 FEET FROM THE WIT LETTER H 23.0 FEET FROM THE 15. Elevation (Show whether DF, RT, GR, etc.) 12. County 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEdial WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING CHANGE PLANS OTHER Bring CSg. valves to ground <td>1.</td> <td>*** · · · · · · · · · · · · · · · · · ·</td> <td></td> <td></td> <td></td> <td>7. Unit Agreement</td> <td>Name Mottin</td>	1.	*** · · · · · · · · · · · · · · · · · ·				7. Unit Agreement	Name Mottin
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Anduat KO Troduction Company 9. Well No. 3. Address of Operator 9. Well No. Box 806, Eunice, New Mexico 88231 4. Location of Well 10. Field and Pool, or Wildeat UNIT LETTER H . 2310 FEET FROM THE West 10. Field and Pool, or Wildeat Line AND 980 THE East Line, section 34 Township 22 RANGE 3319 DF I.6. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON PULL OR ALTER CASING CHANGE PLANS OTHER Bring CSg. valves to ground	2. Name of Operator		······				
3. Address of Operator Box 806, Eunice, New Mexico 88231 4. Location of Well UNIT LETTER H, 2310 FEET FROM THE WORT LINE AND 980 FEET FROM THE East LINE, SECTION 34 TOWNSHIP 22 RANGE 37 NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ALTERING CASING CHANGE PLUG AND ABANDON CHANGE PLUG AND ABANDON CHANGE PLUG AND ABANDON CHANGE PLUS COMMENCE DRILLING OPNS. PULL OR ALTER CASING CHANGE PLANS CHANGE PLA	Anadarko Pi	roduction Co	mpany			Tra	ct 36
BOX 000, EURICE, NEW MEXICO 00251 4. Location of Well 10. Field and Pool, or Wildcat UNIT LETTER H 2310 THE East 10. Field and Pool, or Wildcat LINE AND 980 FEET FROM THE East 10. Field and Pool, or Wildcat LINE, SECTION 34 TOWNSHIP 15. Elevation (Show whether DF, RT, GR, etc.) 12. County 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON PULL OR ALTER CASING CHANGE PLANS OTHER Bring CSg. Valves to ground			<u> </u>		····	9. Wéll No.	
4. Location of Well Martin 10. Field and Pool, or Wildcat UNIT LETTER H , 2310 FEET FROM THE Martin THE East LINE, SECTION 34 TOWNSHIP 22 RANGE 37 NMPM. THE East LINE, SECTION 34 TOWNSHIP 22 RANGE 37 NMPM. 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data 12. County Izea 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING PULL OR ALTER CASING CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT OTHER Bring Csg. valves to ground X	Box 806. Et	unice. New M	Mexico	88231		1	4
UNIT LETTER	4. Location of Well		TIN	1-1	1110	10. Field and Pool	, or Wildcat
THE	Н	2310	FROM THE WORK		EFET FROM	Langlie	Mattix
THE Edist Line, section Township Name Name 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK Altering casing PULL OR ALTER CASING CHANGE PLANS CHANGE PLANS OTHER PLUG Sector Sect	UNIT LETTER	، ۲۵۵۱ میں					
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3319 DF Lea 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON PULL OR ALTER CASING CHANGE PLANS OTHER	THEEddu LINE,	SECTION	(0 WR3hit				
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PERFORM REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING CHANGE PLANS OTHER Bring csg. valves to ground	^{16.} Ch	eck Appropriate	Box To Indicate N	ature of Notice,	Report or Oth	ner Data	
TEMPORARILY ABANDON TEMPORARILY ABANDON PULL OR ALTER CASING CHANGE PLANS CHANGE PL	NOTICE	OF INTENTION T	0:		SUBSEQUENT	REPORT OF:	
TEMPORARILY ABANDON TEMPORARILY ABANDON PULL OR ALTER CASING CHANGE PLANS CHANGE PL					<u> </u>		
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB COTHER Bring CSg. valves to ground X	PERFORM REMEDIAL WORK		PLUG AND ABANDON	REMEDIAL WORK		ALTERIN	IG CASING
other Bring csg. valves to ground X	TEMPORARILY ABANDON			COMMENCE DRILLING	OPNS.	PLUG AN	D ABANDONMENT
	PULL OR ALTER CASING		CHANGE PLANS				•
OTHERlevel.				OTHER Bri	ng csg. v	<u>alves to g</u>	round X
	OTHER			lev	el.		
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed						antimated data of a	tarting any proposed

- l.
- 2.
- Cellars were dug out for casing pressume checks. Connections were added to the intermediate casing and valves were raised to ground level. Note: The intermediate casing is setting on casing clamps at the surface casing and no connections could be made. 3.

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

SIGNED Alenduso	Area Supervisor	DATE 3-17-75
APPROVED BY Halland Kegg CONDITIONS OF APPROVAL, IF ANY:	TITLE OIL & CAR HISPECTOR	SEP 12 1975

NUMBER OF COPIES AT CLIVES DISTRIBUTION SANTA FF FILE U.S.G.T. LANG OFFICE TRANSPORTER OIL GAS PROBATION OFFICE OPERATOR		CERTII	NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO CERTIFICATE OF COMPLIANCE AND ANTHORIZATION TO TRANSPORT OIL AND NATURAL GAS 43 AM 355						
Company or Operator		PRODUCT I		AND 4 COPI		Lease	anglie-M Sand Uni	ACCIX Well No.	
Unit Let	Section34	Township	22	Range 37	<u> </u>	County	Lea		
Pool Langlie-M	attix	ander Station of Stations of Stations	* ************************************	<u> </u>		Kind of Leas	c (State, Fed Fea	Fec)	
	ces oil or cond ocation of tank		Unit Let	tter B	Section 34	Township	22	Range 37	
Authorized transporter o	foil or co	ondensate		Ade	lress (give add	lress to which	approved cor	by of this form is to be sent)	
None									
		ls Gas	Actually (Connected ?	Yes	No			
Authorized transporter o	f casing head f	as 🚺 or dry g	as Date		lress (give add	lress to which	approved cop	by of this form is to be sent)	
None									
If gas is not being sold,	give reasons a	nd also explain	its present di	sposition:					
Remarks	Change in Tr Oil Casing he	an sporter (check	one) Dry Gas Condensate	o	hange in Owne her <i>(explain b</i>	rship elow)			
Inje	ction Wel	ANADARKO; 1 y owned an						965.	
The undersigned cert		21		۸.,	rvation Comm	nission have , 19 <u>65</u>		ied with.	
		this the	day or	Ву		<u> </u>	$\frac{1}{h}$		
Approved by	T	<u>.</u>		 Ti	de Carl		Ľ Ma	Afin	
					PRO	D. RECORI	ds Supvr	./ /	
Title				Ca	mpany ANA[DARKO PRO	DUCTION	COMPANY	
Date				Ac	dress P. (For	D. Box of t Worth,	338 9317 Texas	76107	

NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA F(FILE U.S.G.S. LAND OFFICE TRANSPORTER ORL GAS PRORATION OFFICE OPERATOR		Image: New Mexico oil Conservation Com Sion Santa FE, New Mexico Form C. (Rev. 7- CERTIFICATE OF COMPLIANCE AND AUTHORIZATION C. TO TRANSPORT OIL AND NATURAL GAS Form C. (Rev. 7-					
Company or Operator				4 COPIES	<u>with th</u> 	E APPRONNIA TE OFI	ATTIX Well No.
AMBAS Unit Letter		CORPORATION	Rang	e		PENROSE SAND L	INIT Tr.36 3624
H	32,	22 ^{Aug} 37			T	LEA	od Faal
Pool X LA	NGLIE-MATT	IX	L			Kind of Lease (State, F	
	ices oil or conden ocation of tanks	sate	Unit Letter B		Section 3 ¹	Township 22	Range 37
Authorized transporter of	of oil or cond	lensate 🗌	·	Addres	s(give ad	dress to which approved a	copy of this form is to be sent)
И	IONE						
		ls Gas Ad	tually Conne	cted? Y	e <i>s</i>	No	
Authorized transporter of	of casing head gas					dress to which approved a	copy of this form is to be sent)
4	IONE						
If gas is not being sold	, give reasons and	l also explain its	 present disposit	ion:			
	Change in Tran Oil Casing head	REASO	gas	Chan Othe 964 P	ge in Own (explain i	roper box) ership below) UNITIZATIO SLY REPORTED BY	14
Remarks The undersigned cer	tifies that the R	ules and Regula	tions of the Oi	l Conserva	tion Com	mission have been com	plied with.
		his the <u>1</u> 27H		Je	NE	, 19	
OIL Approver by		ON COMMISSION		By	Prid	D. RECORDESUPVE	J. N. CHAFFIN
Title				Comp	۸N	BASSADOR OIL CO	
Date					Bo	эх 93 3 8, Говт Wo	RTH, IEXAS