NO. OF COPIES RECEIVED		Form C-103 Supersedes Old
DISTRIBUTION	$\mathbb{E}_{\mathbf{x}} = \{ \mathbf{x}_{1}, \mathbf{y}_{2}, \dots, \mathbf{y}_{n} \} $	C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE	SEP 11 G CT ST 1	
U.S.G.S.		
LAND OFFICE		State Fee X
OPERATOR		5. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PROPULATIO	NOTICES AND REPORTS ON WELLS DSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. N FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
1. OIL GAS WELL WELL	OTHER-	7. Unit Agreement Name Langlie Mattix Penrose Sand Unite
2. Name of Operator		8, Farm or Lease Name
Anadarko Production Co	Tract No. 32	
3. Address of Operator	9. Well No.	
Box 247, Hobbs, New N	Aexi co	3
4. Location of Well	10. Field and Pool, or Wildcat	
F 44	FEET FROM THE West LINE AND 1790 FEET F	
UNIT LETTER	FEET FROM THE LINE AND FEET F	
North	33 <u>22-S</u> 37-E	
THELINE, SECTION	TOWNSHIP RANGE NM	4PM. ())))))))))))))))))))))))))))))))))))
	15. Elevation (Show whether DF, RT, GR, etc.) 3358' GR	12. County Lea
<sup>16.</sup> Check A	ppropriate Box To Indicate Nature of Notice, Report or	Other Data
NOTICE OF IN	·· · · ·	ENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
TEMPORARILY ABANDON	CHANGE PLANS CASING TEST AND CEMENT JOB	
PULL OR ALIER CASING	OTHER	
OTHER		
17. Describe Proposed or Completed Ope work) SEE RULE 1103.	rations (Clearly state all pertinent details, and give pertinent dates, inclu	ding estimated date of starting any proposed

- 1. Drilled 7 7/8" hole to 3700'.
- 2. Dresser-Atlas ran Gamma Density Log.
- Ran 3721' of 5 1/2" 14" J-55 new casing. Set @ 3700' GL. 3.
- Cemented w/225 sks. Class 'C' cement w/4% gel & 15# salt per sk. & 190 sks. Class 'C' 4. cement w/10<sup>d</sup> salt per sk. with 3/4 of 1% CFR2. Plug down @ 4:25 PM 8-1-68.
- 5. Shut in waiting on cement.
- 6. Pressure tested casing to 1000 PSIG for one hour without pressure loss.
- 7. Released rig. Shut well in.

NOC TIME?

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

SIGNED _	72 ADreisen	TITLE District Superintendent	9/11/68
APPROVE	DBY THE APPROVAL, IF ANY:	TITLE	DATE