

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30-025-23198

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
001328

7. Lease Name or Unit Agreement Name  
Langlie Mattix Penrose  
Sand Unit

8. Well No.  
15-2

9. Pool name or Wildcat  
Langlie-Mattix SR/QN/GRBG

**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"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:  
OIL WELL ☐ GAS WELL ☐ OTHER ☐ Injection

2. Name of Operator  
Anadarko Petroleum Corp.

3. Address of Operator  
P.O. Box 2497, Midland, TX 79702

4. Well Location  
Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line  
Section 22 Township 22S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3325' GR 3333' RKB

11. 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 checked="" 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"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. 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) Bled down to frac tank.
- 2) RU pulling unit, pulled tbq & unset packer. (Tbg was parted)
- 3) TIH w/new Baker AD1 packer & tbq. (Hydrotested tbq)
- 4) Circ'd packer fluid & set packer @ 3414.72'.
- 5) Ran MIT chart. Pressured to 330# for 30 mins.
- 6) Called OCD & got approval to start injection.
- 7) Returned to injection.

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

SIGNATURE Sabra Sears TITLE Technical Assistant DATE 4/9/97  
TYPE OR PRINT NAME Sabra Sears TELEPHONE NO. 915/683-0534

(This space for State Use)

ORIGINAL BOUND  
BUREAU

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

