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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 ☐ Fee ☒

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection Well	7. Unit Agreement Name Langille Mattix Penrose Sand Unit
2. Name of Operator ANADARKO PRODUCTION COMPANY	8. Farm or Lease Name Tract No. 17
3. Address of Operator P. O. Box 247, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER D , 990 FEET FROM THE West LINE AND 840 FEET FROM THE North LINE, SECTION 26 , TOWNSHIP 22 S , RANGE 37 E NMPM.	10. Field and Pool, or Wildcat Langille Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3326' GR - 3334' RKB	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐ CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☒ OTHER ☐

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.

1. Pressure tested 4-1/2" casing to 1500 psi for 30 minutes without loss of pressure.
2. Rigged up to perforate. Go perforated from 3496' to 3654' with 70 JS.
3. Acidized perforations using 1000 gal. 15% reg. acid.
4. Rigged up well servicing unit, ran 3469' 2-3/8" plastic lined tubing with a Johnson model 101-S packer. Set packer at 3473'.
5. Well is ready for injection.

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

SIGNED **District Superintendent** TITLE **M. J. Zelen** DATE **1-10-70**
APPROVED BY **[Signature]** TITLE **SUB DISTRICT** DATE **1-10-70**
CONDITIONS OF APPROVAL, IF ANY: