

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
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-23422
5. Indicate Type of Lease	STATE ☐ FEE ☒
6. 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. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Lease Name or Unit Agreement Name Lou Wortham C
2. Name of Operator Anadarko Petroleum Corporation	8. Well No. 1
3. Address of Operator P.O. Box 806 Eunice, NM 88231	9. Pool name or Wildcat Eunice SA. South
4. Well Location Unit Letter B : 330 Feet From The North Line and 2310 Feet From The East Line Section 11 Township 22S Range 37E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3356 GL	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☒	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: ☐

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.

- MIRUPU & TOH w/ production string.
- RU Reverse unit & TIH w/ 6 1/4" bit. CO scale to 4210'.
- (A) TIH w/ RBP & treating PKR & treat perfs 4174-86' w/ 3500 gals 15% NEFE acid.
(B) Treat perfs 4100-64 w/ 1500 gals acid.
(C) Treat perfs 4053-4067 w/300 gals acid.
(D) Treat perfs 4023-33 w/ 300 gals acid.
(E) Treat perfs 3916-78' w/1000 gals acid.
(F) Treat perfs 3894-97' w/200 gals acid.
(G) Treat perfs 3870-76' w/200 gals acid.
- TOH w/ RBP & PKR.
- TIH w/ production string.
- POP

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

SIGNATURE Rick L. Langley TITLE Field Foreman DATE 10-22-90
TYPE OR PRINT NAME Rick L. Langley TELEPHONE NO. 394-3184

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: