

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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 <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator ANADARKO PRODUCTION COMPANY		8. Farm or Lease Name Lou Wortham "B"
3. Address of Operator P. O. Box 247, Hobbs, New Mexico 88240		9. Well No. 3
4. Location of Well UNIT LETTER B , 330 FEET FROM THE North LINE AND 2310 FEET FROM THE East LINE, SECTION 11 TOWNSHIP 22 S RANGE 37 E NMPM.		10. Field and Pool, or Wildcat Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) 3356' GL - 3364' RT		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
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.

- Moved In W.E.K. Drilling and rigged up.
- Spudded 12 1/4" hole at 1:30 PM 1/14/70.
- Drilled 374' of 12 1/4" hole.
- Ran 364' 9 5/8" 32.30# H-40 surface casing. Set at 373'.
- Cemented with 225 sacks of Class H cement with 2% CaCl. Circulated 35 sacks of cement out at surface. Plug down at 2:45 AM 1/15/70. SI WOC.
- After 24 hours pressure tested casing to 750# for 30 minutes without pressure loss.
- Drilling ahead with 8 3/4" bit.

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

SIGNED *[Signature]* TITLE District Superintendent DATE 1/28/70
APPROVED BY *[Signature]* TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: