

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Lou Wortham

8. Well No.

5

9. Pool name or Wildcat

South Eunice San Andres

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

2. Name of Operator

Anadarko Petroleum Corporation

3. Address of Operator

P.O. Box 806 Eunice, NM 88231

4. Well Location

Unit Letter C : 990 Feet From The North Line and 1650 Feet From The West Line  
Section 11 Township 22S Range 37E NMPM Lea County

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

3366' GR 3375' RKB

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

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.

1. MIRUPU TOH w/ production rods, pump, & tbg.
2. Perforate additional San Andres Zone 2/sfp 4196-4206'.
3. Acidize w/ 3500 gal 20% FE Acid.
4. Run production tbg, pump, & rods & return to production.

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

10-5-92

TYPE OR PRINT NAME

Rick L. Langley

TELEPHONE NO.

394-3184

(This space for State Use)

APPROVED BY

TITLE

DATE

10/10/92

CONDITIONS OF APPROVAL, IF ANY: