

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

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 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
3. Address of Operator Box 806 Eunice, NM 88231	9. Well No. 5
4. Location of Well UNIT LETTER <u>C</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>West</u> LINE, SECTION <u>11</u> TOWNSHIP <u>22 S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or WHdcat South Eunice San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3366' GR 3375' RKB	12. County Lea

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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. MIRUPU, TOH w/Rods, pump & tubing.
2. TIH w/bit, DC & tubing.
3. Rip up Reverse unit, CO scale to PBD (4725')
4. TOH w/tubing, DC & bit.
5. TIH w/packer & BP, isolate perms. (4116'-4250') Acidize w/1500 gals 15% HCL and scale inhibitor. Flush to perms w/KCL water.
6. TOH w/tubing, PKR & BP.
7. TIH w/tubing, pump & rods.
8. POP

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

SIGNED <u>Richy I. Longley</u>	TITLE <u>Production Foreman</u>	DATE <u>9-27-82</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>[Signature]</u>	DATE <u>OCT 1 1982</u>
CONDITIONS OF APPROVAL, IF ANY:		