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. 30-025-31660

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.)

7. Lease Name or Unit Agreement Name
Langlie Mattix Penrose Sand Unit Tract 13C

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Anadarko Petroleum Corporation

8. Well No.
13

3. Address of Operator
P.O. Box 806

9. Pool name or Wildcat
Langlie Mattix SR-Q-G-SA

4. Well Location
Unit Letter C : 38 Feet From The North Line and 1379 Feet From The West Line

Section 27 Township 22S Range 37E NMPM Lea County

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

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☒		
OTHER:	☐			OTHER: Intermediate Csg			☐

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. Drilled 11" hole to 2790'.
2. Ran 9 jts 806' of 8 5/8" 28# S80 R3 ST&C new csg & 62 jts 1979' 8 5/8" 24# K-55 R3 ST&C new csg.
3. RU Dowell. Cemented w/ 1054 SX of 35/65 POZ w/ 6% D-20 & 10% D-44. Tailed in w/ 20 SX of Class C w/2% CaCL.
4. Plug down @ 3:00 A.M. 9-8-92. 160 SX to pit.
5. Pressure test csg to 1000# for 30 minutes. Csg O.K.

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

SIGNATURE John C. English TITLE Area Supervisor DATE 9-11-92

TYPE OR PRINT NAME John C. English TELEPHONE NO. 394-3184

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE DATE SEP 16 '92

CONDITIONS OF APPROVAL, IF ANY: