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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 checked="" type="checkbox"/> <b>XXXXX</b>  |  | 7. Unit Agreement Name<br><b>Langlie Mattix Woolworth Unit</b> |
| 2. Name of Operator<br><b>Amerada Petroleum Corporation</b>   |  | 8. Farm or Lease Name  |
| 3. Address of Operator<br><b>P. O. Box 668 - Hobbs, New Mexico 88240</b>  |  | 9. Well No.<br><b>103</b>                                      |
| 4. Location of Well<br>UNIT LETTER <b>F</b> , <b>1650</b> FEET FROM THE <b>North</b> LINE AND <b>2310</b> FEET FROM<br><b>West</b> LINE, SECTION <b>28</b> TOWNSHIP <b>24-S</b> RANGE <b>37-E</b> NMPM. |  | 10. Field and Pool, or Wildcat<br><b>Langlie Mattix</b>        |
| 15. Elevation (Show whether DF, RT, GR, etc.)   |  | 12. County<br><b>Lea</b>                                       |

16.

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

NOTICE OF INTENTION TO:

|   |   |
|---|---|
| PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>              | CHANGE PLANS <input type="checkbox"/>     |
| PULL OR ALTER CASING <input type="checkbox"/>             | OTHER <input type="checkbox"/>            |

SUBSEQUENT REPORT OF:

|   |   |
|---|---|
| REMEDIAL WORK <input type="checkbox"/>              | ALTERING CASING <input type="checkbox"/>      |
| COMMENCE DRILLING OPNS. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER <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.

**Convert TA well to injection. Pull tubing, hydrotest, clean out, deepen to 3700', run GR-N log, acidize with 500 gals. 15% NE acid, run tubing, packer, install necessary well head equipment and initiate injection.**

TO: [illegible]  
EFFECTIVE: 10/29/68

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

SIGNED [Signature] TITLE Asst. Dist. Supt. DATE 10-29-68

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: