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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.	

SUNDY 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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name Langlie Mattix Woolworth Unit
2. Name of Operator Amerada Division, Amerada Hess Corporation		8. Firm or Lease Name
3. Address of Operator P.O. Drawer 817 - Seminole, Texas 79360		9. Well No. 113
4. Location of Well UNIT DEEPEN <u>P</u> <u>660'</u> FEET FROM THE <u>South</u> LINE AND <u>330'</u> FEET FROM <u>East</u> LINE, SECTION <u>33</u> TOWNSHIP <u>24S</u> RANGE <u>37E</u> N.M.P.M.		10. Field and Pool, or Wildcat Langlie Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3199' RT		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <u>Convert to Water Injection</u> <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

Plan to deepen from 3525' to 3670', acidize with 1000 gal. 15% acid, run logs and convert to a water injection well.

18. I, Joe R. [Signature] certify that the information above is true and complete to the best of my knowledge and belief.

APPROVED BY [Signature] TITLE Region Manager DATE 11-13-70

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT DATE NOV 16 1970

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 10 1970

OIL CONSERVATION COMM.
HOUSTON, TEX.