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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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- T.A. | | 7. Unit Agreement Name |
| | | Langlie Mattix Woolworth Unit Water Supply |
| 2. Name of Operator | | 8. Farm or Lease Name |
| Amerada Petroleum Corporation | | |
| 3. Address of Operator | | 9. Well No. |
| P.O. Box 668 - Hobbs, New Mexico | | 1 |
| 4. Location of Well | | 10. Field and Pool, or Wildcat |
| UNIT LETTER M , 660 FEET FROM THE West LINE AND 1300 FEET FROM | | Langlie Mattix |
| THE South LINE, SECTION 27 TOWNSHIP 24S RANGE 37E NMPM. | | |
| 15. Elevation (Show whether DF, RT, GR, etc.) | | 12. County |
| | | Lea |

16.

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

NOTICE OF INTENTION TO:

| | |
|--|---|
| PERFORM REMEDIAL WORK <input 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 T.A. <input checked="" 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 1508.

FOR RECORD ONLY: To advise this well is still closed in and temporarily abandoned with no other plans at this time.

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

| | | |
|---|--------------------------------------|----------------------------------|
| SIGNED <u><i>[Signature]</i></u> | TITLE District Superintendent | DATE 11-7-66 |
| APPROVED BY <u> </u> | TITLE <u> </u> | DATE <u> </u> |
| CONDITIONS OF APPROVAL, IF ANY: | | |