Drawer DD
Artesia, NM 88210 MM UIL CONS COMMISSION

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(June 1990) DEPARTMEN	TED STATES IT OF THE INTERIOR	FORM APPROVED Budget Bureau No. 1001-0135 Expires: March 31, 1993
_{— ДП} ЭВŲREAU OF I	LAND MANAGEMENT	5. Lease Designation and Serial No.
TO SUNDRY NOTICES AND REPORTS ON WELLS		NM-0467931 6. Il Indian, Affortee or Tribe Name
Do not use this form for proposals to dr	III or to deepen or reentry to a different reservoir. R PERMIT—" for such proposals	V. 10 10000
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
		- 500
i ign of Well Oil Well	niection well APR 29.'94	R. Well Name and Nn. Fed.
2. Name of Operator		Loco Hills R Wad.#8
Anadarko Petroleum Corpo	oration V O. C. D.	30-015-20696
		10. Field and Poul, or Exploratory Area
PO Box 130, Artesia, New Mexico 88211-0130 4 treation of Well (Footage, Sec., T., R., M., or Survey Description)		Square Lake-GB-SA II. County or Parish, State
1980' FNL and 660' FEL,	Sec. 10-T1/S-R30E	, commy
		Eddy, New Mexico
17 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
X Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction Non Routine Fracturing
Subsequent Report	Lingging Back Casing Repair	Water Shut-Off
Final Ahandonment Notice	Altering Casing	Conversion to Injection
	X taller Change Inj. profi	Completion or Recompletion Report and Log form.)
Describe Proposed or Completed Operations (Clearly state a give subsurface locations and measured and true vertically)	If pertinent details, and give pertinent dates, including estimated date of startical depths for all markers and zones pertinent to this work.)*	ig any proposed work. If well is directionally draied
back across the Pr and leaving open to formation. Will ru increase is needed	injection profile on this well lemier pay zone of the Grayburg he upper Metex pay zone of the Contact and in a new step rate test if an in will wash out sand and reopen x pay is flooded out.	formation Grayburg jection pressur e
	GUBJECT TO LINE APPROVAL BY STATE	
14. I hereby certify that the foregoing is true and correct	pical Panaman	nu 4-6-94
Signed Min Braserell	tideField Foreman	Date
(This space for Federal or State office use)	PETROLEUM ENGINEER	Date 4/26/94
Approved by <u>Organished by Shannon J. Shaw</u> Conditions of approval, if any:	Title	