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OIL CONSERVATION DIVISION

P. O. BOX 208
SANTA FE, NEW MEXICO 87501

RECEIVED BY
MAR 25 1985
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State Fee
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 <input checked="" type="checkbox"/> - Water Injection Well	7. Unit Agreement Name Ballard Grayburg San Andres Unit
2. Name of Operator Anadarko Production Company	8. Farm or Lease Name Tract No. 23
3. Address of Operator P. O. Drawer 130, Artesia, New Mexico 88210	9. Well No. 3
4. Location of Well UNIT LETTER <u>L</u> _____ 1900 FEET FROM THE <u>South</u> LINE AND 890 FEET FROM THE <u>West</u> LINE, SECTION <u>5</u> TOWNSHIP <u>18S</u> RANGE <u>29E</u> NMPM.	10. Field and Pool, or Wildcat Loco Hills-Queen- Grayburg-San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3576.3' GL	12. County Eddy

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING OTHER

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
 CASING TEST AND CEMENT JOB
 OTHER Acidize

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.

1. Rigged up pulling unit; TOH with tubing and packer.
2. WIH with packer and RBP.
3. Straddled perfs from 2567' to 2688' and acidized with 1350 gals 15% NE-FE acid; AR&P = 3 BPM @ 1900 $\frac{1}{2}$; TOH.
4. WIH with packer on 2-3/8" plastic lined tubing.
5. Circulated hole with fresh water and chemical; set packer @ 2460'; tested casing to 500 $\frac{1}{2}$ in accordance with NMOCD rules and regulations. RDFU.
6. Returned well to water injection.

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

SIGNED M. B. Brunwell TITLE Field Foreman DATE March 25, 1985

APPROVED BY Original Signed By Leslie A. Clements Supervisor District II TITLE _____ DATE MAR 28 1985

CONDITIONS OF APPROVAL, IF ANY: