

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☐ other **X** - Water Injection

2. NAME OF OPERATOR

Anadarko Production Company /

3. ADDRESS OF OPERATOR

P. O. Box 67, Loco Hills, New Mexico 88255

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 2630'FNL&10'FWL Sec. 31.T16S.R31E

AT TOP PROD. INTERVAL: Same Eddy County, N. Mex.

AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON*

(other) Cement squeeze casing

SUBSEQUENT REPORT OF:

RECEIVED
NOV 3 1981
(NOTE: Report change)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

1. Rigged up pulling unit; tripped out of hole with tubing and injection packer.
2. Set 4½" CIBP @ 2600'.
3. Ran 4½" RTTS squeeze packer.
4. Established pump-in rate & pressure = 3 BPM @ 2500# out hole in casing @ 2350'.
5. Cement squeezed with 2000 gals flocheck & 200 sx Class H w/6% gel & 200 sx Class H w/3# Salt/sx, .3 of 1% CFR-2 & 2% CaCL. AR&P = 1½ BPM @ 2100#. Final sqz press = 2800#.
6. Tripped out of hole with RTTS packer.
7. Drilled out 300' cement & CIBP.
8. Re-ran tubing and injection packer; circulated packer fluid (chemical water).
9. Reset packer @ 2952'.
10. Pressure tested 4½" casing to 700 psig - test witnessed by Mr. Weaver of NMOCC.
11. Rigged down pulling unit.
12. Returned well to injection.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

Area Supervisor

DATE _____

October 30, 1981.

(This space for Federal or State office use)

APPROVED BY

TITLE

DAT

CONDITIONS OF APPROVAL, IF ANY:

NOV 20 1961
602
U.S. GEOLOGICAL SURVEY
ROSWell, NEW MEXICO