Anadarko
Production Company

MEMORANDUM

DATE 5/21/84

TO Mike Williams

ROOM _____ BLDG. _____

- ☐ PER OUR CONVERSATION
- ☒ PER YOUR REQUEST
- ☒ FOR YOUR INFORMATION
- ☐ FOR YOUR FILE
- ☐ FOR YOUR APPROVAL
- ☐ FOR YOUR SIGNATURE
- ☐ FOR FOLLOW UP RECORD
- ☐ PLEASE RETURN TO _____
- ☒ FOR DISCUSSION
- ☐ PLEASE COMMENT
- ☐ PLEASE DISTRIBUTE
- ☐ PLEASE PHONE
- ☐ PLEASE PROCESS
- ☐ PLEASE SEE ME
- ☐ PLEASE SEND ME FILE

You recently requested Notification concerning our plans to repair this well. We are waiting on BLM approval. or do we need to skip the BLM & send you a "Notice of Intent"?

Robinson #8 has been repaired. Will run tracer survey first.

SIGNATURE

Form 9-331
Dec. 1973

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 Well
2. NAME OF OPERATOR
Anadarko Production Company
3. ADDRESS OF OPERATOR
P. O. Drawer 130, Artesia, N.M. 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FN & WLs
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

5. LEASE NM - 074935
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Loco Hills "A" Federal
9. WELL NO.
7
10. FIELD OR WILDCAT NAME
Grayburg-Jackson-Queen-San Andres
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
15 - 17S - 30E
12. COUNTY OR PARISH
Eddy
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3697' GL

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

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐		☐
FRACTURE TREAT	☐		☐
SHOOT OR ACIDIZE	☐		☐
REPAIR WELL	☐		☐
PULL OR ALTER CASING	☐		☐
MULTIPLE COMPLETE	☐		☐
CHANGE ZONES	☐		
ABANDON*	☐		
(other) Repair Waterflow X			

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

RECEIVED BY
MAY 22 198
O. C. D.
ARTESIA, OFFICE

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

Note: This well has a water flow out of braidenhead - approx. 20 BWPD.

We would like to braidenhead squeeze this well since the top of the cemen @ 1180' and in a ratty salt at the bottom of the salt section. This well 8-5/8" casing from surface to 480' and 5½" casing from surface to 2900'.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____

18. I hereby certify that the foregoing is true and correct
SIGNED Mike Braswell TITLE Field Foreman DATE May 11,

(This space for Federal or State office use)
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

BENNETT WIRE LINE SERVICE
503 McAR[illegible]
ARTESIA, NEW MEXICO 88210
Phone 746-3281

TEMPERATURE SURVEY

OPERATOR ANADARKO PRODUCTION COMPANY

LEASE No.7-15

WELL NO. _____

FIELD _____

DATE & TIME CEMENT JOB COMPLETED _____

DATE & TIME SURVEY MADE 5/4/72 3:30 PM.

SURVEY RUN BY E.D. Bennett

DATUM _____

WELL DATA Cement top 1180 ft.