NM OIL CONS. CONDITED ON PORM 9-331 DESCRIPTION DESCRIPTION DD	RECEIVED BY	Form Approved.
Autorio NM 88210 MITTED STATE		Budget Bureau No. 42-R1424 5 LEASE
DEPARTMENT OF THE	NTERNORN 0 1 1984	NM - 074935
GEOLOGICAL SUR	EY O. C. D.	6 IF INDIAN, ALLOTTEE OR TRIBE NAME
	ARTESIA, OFFICE	
SUNDRY NOTICES AND REPO		7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to dee reservoir. Use Form 9–331–C for such proposals.)	pen or plug back to a different	8. FARM OR LEASE NAME
1. oil gas other X=Wat	er Injection Well	Loco Hills "A" Federal 9. WELL NO.
2. NAME OF OPERATOR	er injection werr	7
Anadarko Production Compan	v i⁄	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR		Grayburg-Jackson-Queen-San Andre
P. O. Drawer 130, Artesia,		11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION	N CLEARLY. See space 17	AREA
below.) AT SURFACE: 1980' FN & WLs		15 - 17S - 30E 12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Same		Eddy New Mexico
AT TOTAL DEPTH: Same		14. API NO.
16. CHECK APPROPRIATE BOX TO INDICA	TE NATURE OF NOTICE,	
REPORT, OR OTHER DATA		15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBS	EQUENT REPORT OF:	3697 GL
TEST WATER SHUT-OFF	EQUENT REPORT OF:	
FRACTURE TREAT		
SHOOT OR ACIDIZE		
REPAIR WELL PULL OR ALTER CASING		(NOTE: Report results of multiple completion or zone
MULTIPLE COMPLETE	H	change on Form 9-330.)
CHANGE ZONES		
ABANDON* [] (other)Repair Waterflow X		
17. DESCRIBE PROPOSED OR COMPLETED including estimated date of starting any measured and true vertical depths for all	proposed work. If well is di	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and
	·	nhead - approx. 20 BWPD.
We would like to braidenhead	squeeze this well:	since the top of the cement is
	-	•
@ 1180' and in a ratty salt a	t the bottom of the	e salt section. This well has
8-5/8 casing from surface to	$480'$ and $5\frac{1}{2}''$ casin	ng from surface to 2900'.
P	211-20	1: HM with
lungues &	ary of	
solate the se	elt serti	ist Must
Subsurface Safety Valve: Manu. and Type		Set @Ft.
18. I hereby certify that the foregoing is true a	nd correct	
SIGNED Mine Brewell		n May 11, 1984
6.16.24 1/1/	s space for Federal or State offi	

BENNETT WIRE LINE SERVICE
503 McARTI
ARTESIA, NEW MEXICO 88210
Phone 746-3281

TEMPERATURE SURVEY

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