

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 Water Injection
2. NAME OF OPERATOR  
Anadarko Production Company
3. ADDRESS OF OPERATOR  
P. O. Drawer 130, Artesia, New Mexico
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660 FSL & 1980 FWL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

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

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>

(other) Convert to Water Injection

5. LEASE  
LC 029342 (b)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Loco Hills ~~Federal~~ "B" Fed.
9. WELL NO.  
7
10. FIELD OR WILDCAT NAME  
Grayburg Jackson
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 9-T17S-R30E
12. COUNTY OR PARISH  
Eddy
13. STATE  
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3692' GL

RECEIVED

NOV 12 1982

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

O. C. D.  
ARTESIA, OFFICE

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. Rig up pulling unit.
2. Squeeze queen perms (2106-2112') w/required cement volume.
3. TIH w/injection pkr. on 2-3/8" IPC tbg.
4. Set pkr. & pressure test annulus to 500 psi.
5. Unset pkr., load annulus w/pkr. fluid, set pkr.
6. Equip well for water injection in accordance w/NMOCC order #R4830 dated July 1974.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED John H. Beckman Jr. TITLE Engineer DATE 11/3/82

APPROVED PETER W. CHESTER (This space for Federal or State office use)  
APPROVED BY (Orig. Sgd.) PETER W. CHESTER DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

NOV 10 1982  
FOR  
JAMES A. GILLHAM  
DISTRICT SUPERVISOR

See Instructions on Reverse Side