

4/5F

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

5. LEASE DESIGNATION AND SERIAL NO.

NM - 0467931

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal R

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Square Lake-Grayburg-SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

10 - 17S - 30E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER ☒ X-Convert to WIW

2. ARTESIA ☒ ANADARKO Production Company

3. ADDRESS OF OPERATOR

P. O. Drawer 130, Artesia, New Mexico 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)

At surface

1980' FNL & 660' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3729' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☒ Convert to WIW

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

X

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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; TOH with rods and tubing.
2. WIW with 4 1/2" Watson Type SL injection packer on plastic lined tubing.
3. Pumped treated water and Zylene across perforations to clean perforations.
4. Pulled packer up to 2800'; circulated hole with fresh water and chemical.
5. Set packer @ 2800' GL and tested casing to 500# in accordance with NMOCD rules and regulations.
6. Equipped well for water injection.
7. Commenced water injection in accordance with NMOCD Order #R-7771 dated 1-8-85.

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

SIGNED

Mike Brumwell

TITLE

Field Foreman

DATE

March 5, 1985

(This space for Federal or State office use)

APPROVED BY

ACCEPTED FOR RECORD

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

See
MAR 12 1985

*See Instructions on Reverse Side

Post ID-3
3-15-85
Conn. with WIW