RECEIVED BY

Form	Approved	1.	
Budge	t Bureau	No.	42-R142

Dec. 1973				i Approved. et Bureau No. 42-R1424	
	MAR TON HERED ST	ATES	5. LEASE		
	DEPARTMENT OF T	HEINTERIOR	NM - 9011		
	ARTESIA, OFFICEL	SUFVEY	6. IF INDIAN, ALLOTTES	OR TRIBE NAME	
SUNDE	RY NOTICES AND F	REPORTS ON WELLS	7. UNIT AGREEMENT N	AMF	
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	Ballard Grayburg San Andres Unit		
			8. FARM OR LEASE NAME		
1. oil gas		Tract No.	Tract No. 8		
well well other Convert to WIW			9. WELL NO.		
	OF OPERATOR		4		
Anadarko Production Company			10. FIELD OR WILDCAT NAME		
	S OF OPERATOR		Loco Hills-Queen-	Grayburg-San Andres	
		ia, New Mexico 88210	11. SEC., T., R., M., OR E	BLK. AND SURVEY OR	
4. LOCATIO below.)	IN OF WELL (REPORT LOC	ATION CLEARLY. See space 17	4		
AT SURF	FACE: 660' FNL & 19	980 ° FEL	5 - 185 -		
	PROD. INTERVAL: Same		12. COUNTY OR PARISH		
AT TOTA	L DEPTH: Same	_	Eddy 14. API NO.	New Mexico	
16. CHECK		DICATE NATURE OF NOTICE	14. API NO.		
	, OR OTHER DATA		15. ELEVATIONS (SHOW 3567 GL	DF, KDB, AND WD)	
REQUEST FO	OR APPROVAL TO:	SUBSEQUENT REPORT OF:	2307 GE		
TEST WATER					
FRACTURE T		H			
REPAIR WEL	· <u></u>		0.075		
PULL OR AL	TER CASING		(NOTE: Report results of mu change on Form 9-	ultiple completion or zone 330 )	
MULTIPLE C			<b>G</b>		
CHANGE ZOI ABANDON*	NES [				
	vert to WIW X	LJ			
(000.					
11161661111	esumated date of Starring	TED OPERATIONS (Clearly states any proposed work. If well is or all markers and zones pertine	directionally drilled aire auch	give pertinent dates, surface locations and	
		from Open Hole in Gr		11	
Rie up n	oulling unit: TOH w	with rods and tubing.	ayourg zone under /	casing.	
GIH with	bit and clean out	t to original TD of 2	794'• TOH		
Run appr	coximately 500' of	42" liner and set at	TD.		
Circulat	te cement on liner.				
	CCL and perforate G				
. GIH with	packer and acidiz	e Grayburg perforati	ons; TOH.		
			•		

- 2.
- 3.
- 4.
- 5.
- 6.
- Run 4½ injection packer on 2-3/8" plastic lined tubing; circulate hole with fresh water and chemical; set packer and test casing to 500# in accordance with NMOCD rules and regulations.
- 8. Equip well for water injection.
- 9. Commence water injection in accordance with NMOCD Order # R-7773 dated 1-8-85.

ty Valve: Manu. and Type	et @ Ft
ify that the foregoing is true and correct  TITLE Field Foreman DATE Novem	ber 12, 1984
(This space for Federal or State office use)  Mary Hollis TITLE Tolk (September 1944)  PPROVAL, IF ANY:   OF THE STATE OF THE DATE 3-4	7
PPROVAL, IF ANY:	

Subject to Like Approval by State

\*See Instructions on Reverse Side

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