

CSF

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Anadarko Petroleum Corporation

3. Address and Telephone No.
PO Drawer 130, Artesia, NM 88211-0130 (505) 437-2411

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 330' FEL
Sec. 6, T18S, R29E

OCT 19 '94

FORM APPROVED
Budget Bureau No. 1001-0133
Expires: March 31, 1993

5. Lease Designation and Serial No.
LC-058126

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
Ballard GSA Unit

8. Well Name and No.
#6-1

9. API Well No.
30-015-03314

10. Field and Pool, or Exploratory Area
Loco Hills-Qn-GB-SA

11. County or Parish State
Eddy, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>H₂S Concentration & Radii of Exposure</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

13. 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.)*

The following REVISED H₂S Concentration & Radii of Exposure are hereby supplied as per BLM Onshore Order #6, Part 3160.1, III, A, 2, C.

2.8	19,000	16'	7.3'
Gas Volume	H ₂ S ppm	100 ppm	500 ppm
(MCFPD)		Radii of Exposures	

RECEIVED
SEP 26 9 33 AM '94
CARLE AREA

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

Signed Mark E. Caplan Title Field Foreman

Date 09-21-94

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____ Date _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side