

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

THE BLM CONS COMMISSION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1001-0133
Expires: March 31, 1993
5. Lease Designation and Serial No.
LC-061702
6. If Indian, Allottee or Tribe Name

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

RECEIVED

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) 677-2411
4. Location of Well (Frontage, Sec., T., R., M., or Survey Description)
660' FNL & 1980' FWL
Sec. 8, T18S, R29E

7. If Unit or CA, Agreement Designation
Ballard GSA Unit
8. Well Name and No.
15-2.
9. API Well No.
30-015-03337
10. Field and Pool, or Exploratory Area
Loco Hills-Qn-GB-SA
11. County or Parish, State
Eddy, NM

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

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other H₂S Concentration
& Radii of Exposure

☐ Change of Plans
☐ New Construction
☐ Non Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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.

1.9
Gas Volume
(MCFPD)

5250
H₂S ppm

5.6'
100 ppm

2.6'
500 ppm

Radii of Exposures

SEP 26 9 36 AM '94
CARLOS J. TORRES
AREA HEADQUARTERS

RECEIVED

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

Signed Wesley E. [Signature] Title Field Foreman
(This space for Federal or State office use)

Date 09-22-94

Approved by _____
Conditions of approval, if any:

Title _____

Date _____