| Fern. 3160-5<br>(November 1983)   | U JED STATES  | SUBMIT IN TR CA  | Budget Bureau No. 1004-1 32 S   |
|---|---|--|---|
| .Formerly 9-331;  | DEPARTMENT OF THE INTER BUREAU OF LAND MANAGEMER  | 5 5 5 5 1 Cl   | 5. LEASE DESIGNATION AND SERIAL NO. NM-56429  |
| SU<br>(De not use th  | NDRY NOTICES AND REPORTS his form for proposals to drill or to deepen or plus Use "APPLICATION FOR PERMIT—" for such                            | ON WELLS   | 6 IF INDIAN, ALLOTTEE OR TRIBE NAME   |
| OIL XX GAS  |   | RECEIVED BY  | 7. UNIT AGREEMENT NAME  |
| 2. NAME OF OPERATOR   | V   | APR 21 1987  | 8. FARM OR LEASE NAME   |
| Anadarko I  | Petroleum Corporation 🗸   | O. C. D.   | Travis "D" Federal  |
| P. O. Drawer 130, Artesia, New Mexico ARESA OFFICESO.  LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)  See also space 17 below.)  At surface |   |  | 10. FIELD AND POOL OR WILDCAT LOCO Hills-Qn-GB-SA   |
| 660' FSL 8  | 660' FEL  |  | 11. SEC., T., E., M., OR BLE. AND<br>SURVEY OR AREA   |
|   |   |  | 18-18S-29E 12. COUNTY OR PARISH: 13. STATE  |
| 14. PERMIT NO.  | 15 ELEVATIONS (Show whether 3563 DF   | DF, RT, GR. etc.)  | Eddy New Mexico   |
| 16.   | Check Appropriate Box To Indicate   | Nature of Notice, Report,  |   |
|   | NOTICE OF INTENTION TO:   |  | BSEQUENT REPORT OF:   |
| 17 DESCRIBE PROPOSET proposed work, nent to this work  Please exis under tion since   | MULTIPLE COMPLETE ABANDON* CHANGE PLANS  OF COMPLETE: OPERATIONS (Clearly state all pertin if well is directionally drilled, give subsurface to | cations and measured and true value Loco Hills paytes Petroleum Content Conten | results of multiple completion on Well completion Report and Log form.  dates including estimated date of starting any ertical depths for all markers and zones pertinether year. This well y of the Grayburg Formarporation's South Loco |
|   |   |  |   |
| APPRO'  | VED FOR 12 MONTH PERIOD   |  |   |
| ENDING  | April 9, 1988   |  |   |
|   | 7700  |  |   |
|   |   |  |   |
| 18. I hereby certify th   | ast the foregoing is true and correct   |  |   |
| SIGNED  | MAN SILLE TITLE   | Area Supervisor  | April 9, 1987   |
| (This space for F   | ederal or State office use)   |  | DATE 4/20/87  |
|   | APPROVAL, IF ANY:   |  |   |

\*See Instructions on Reverse Side