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UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

FEB 07 1983

O. C. D. SUNDRY NOTICES AND REPORTS ON WELLS
(Do not use this form for proposals to drill or to deepen or plug back to a different
ARTESIA, OFFICE. Use Form 9-331-C for such proposals.)

1. oil ☐ gas ☐
well well other ☒ - Water Injection

2. NAME OF OPERATOR
Anadarko Production Company

3. ADDRESS OF OPERATOR
P. O. Drawer 130, Artesia, New Mexico 88210

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17
below.)
AT SURFACE: 660' FSL & 1980' FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

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FEB 25 1983
OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL NEW MEXICO

☒ - Convert to water injection

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.
2. Tripped out of hole with rods and tubing.
3. Ran 4 1/2" CIBP and set @ 3275' GL.
4. Ran 4 1/2" Watson SL Injection packer on 2-3/8" SALTA (internally plastic lined)
tubing. Washed the perforations with 500 gals 5% HCL acid and 200 gals Zylene;
reversed out acid and Zylene.
5. Circulated packer fluid; set packer @ 2405' GL; tested casing above packer to 500#.
Mr. Weaver with NMOCD witnessed test.
6. Equipped well head for water injection.
7. Commenced water injection 1-12-83 in accordance with NMOCD Order #R7000, Case # 7572
dated June 11, 1982.

Note: The braidenhead and casing head are equipped with pipe and valves brought
to surface to monitor possible tubing, casing or packer leaks.
Subsurface Safety Valve: Manu. and type _____ Set @ _____ Ft.

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

SIGNED _____ TITLE Area Supervisor DATE January 24, 1983

ACCEPTED FOR RECORD

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL IF ANY

FEB 4 1983

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

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