Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
JAN - 2 1991
O. C. D.
ARTESIA, OFFICE

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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

5. Lease Designation and Serial No.: NM - 9011
6. If Indian, Allottee or Tribe Name:
7. If Unit or CA, Agreement Designation: Ballard Grayburg-San Andres Unit Tr. 8
8. Well Name and No.: 5
9. API Well No.: 30-015-20983
10. Field and Pool, or Exploratory Area: Loco Hills-GB-San Andres
11. County or Parish, State: Eddy County, NM

1. Type of Well: ☐ Oil Well ☐ Gas Well ☒ Other Water Injection Well
2. Name of Operator: Anadarko Petroleum Corporation
3. Address and Telephone No.: P.O. Drawer 130, Artesia, New Mexico 88211-0130 (505) 748-3368
4. Location of Well (Footage, Sec., T., R., M., or Survey Description): 20' FNL & 1500' FEL, Sec. 5 - T18S - R29E

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

TYPE OF SUBMISSION	TYPE OF ACTION	
☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment Notice	☐ Plugging Back	☐ Non Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other Replaced 1 jt of tubing & conducted csg integrety test	☐ 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.)*

1. RUPU.
2. Unset packer.
3. Replaced top joint of 2-3/8" internally plastic coated tubing.
4. Circulated chemical water between casing & tubing.
5. Reset packer.
6. Conducted casing integrety test (Chart attached over & signed by John Robinson (NMOCD Artesia).
7. Returned to water injection (in accordance w/ NMOCD Order R-4493, dated April 5, 1974).

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

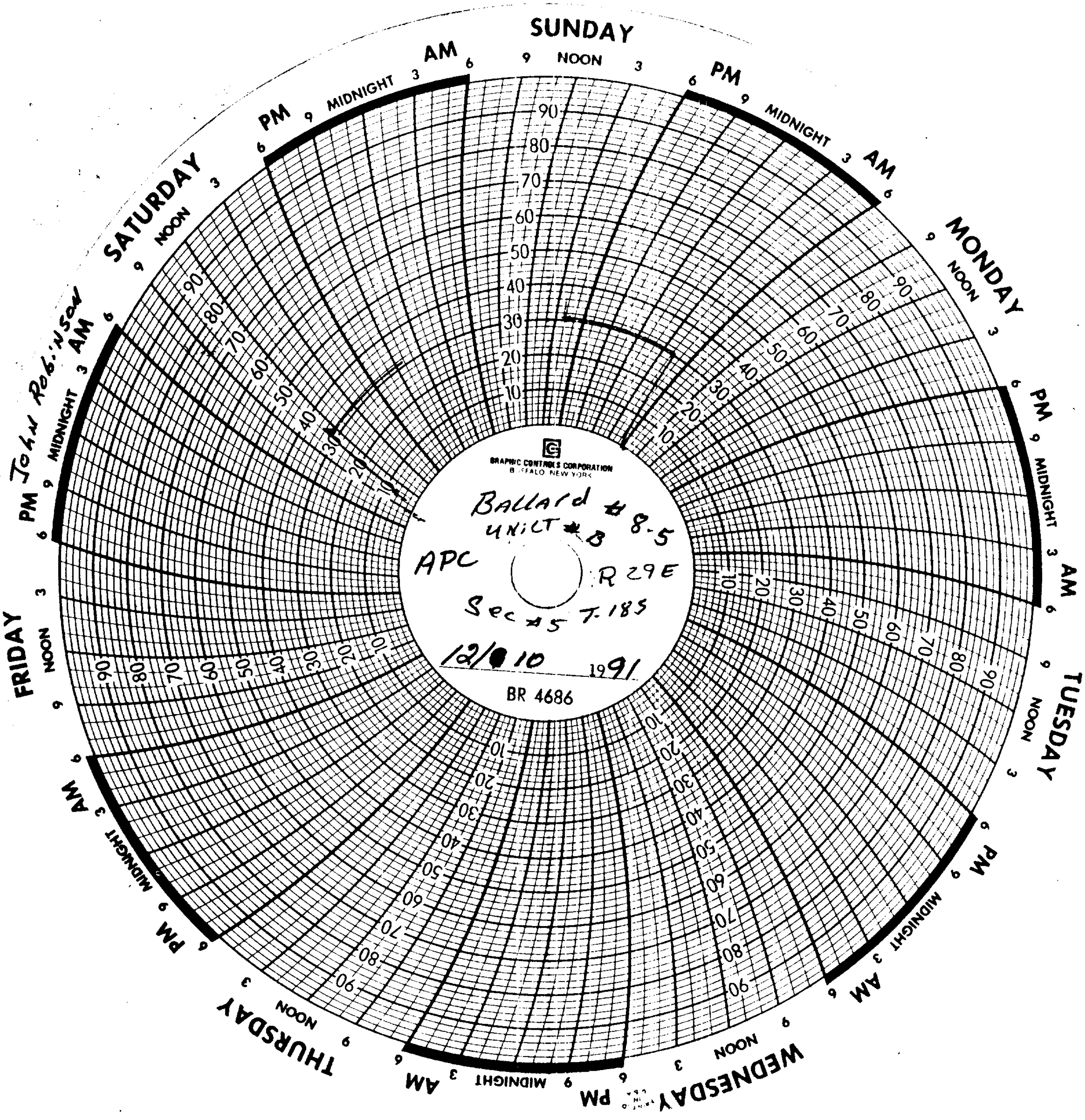
Signed Jerry E. Knowles Title Area Supervisor Date 12-16-91

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

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



SUNDAY
MONDAY
TUESDAY
WEDNESDAY
THURSDAY
FRIDAY
SATURDAY
NOON
MIDNIGHT
AM
PM
GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK
Ballard # 8-5
UNIT # B
APC
R 29E
Sec #5 T-18S
12/10 1991
BR 4686
John Robinson