

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Drawer DD  
Artesia, NM 88210

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☐ well gas ☐ well other ☒ Water Injection
2. NAME OF OPERATOR  
Anadarko Production Company
3. ADDRESS OF OPERATOR  
P.O. Box 2497 Midland, Texas 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980' FNL & 660' FEL  
AT TOP PROD. INTERVAL: Sec 7, T18S - R29E  
AT TOTAL DEPTH: Eddy County, New Mexico

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

- REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
- |                                    |                          |                          |
|------------------------------------|--------------------------|--------------------------|
| TEST WATER SHUT-OFF                | <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT                     | <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE                   | <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL                        | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING               | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE                  | <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES                       | <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON*                           | <input type="checkbox"/> | <input type="checkbox"/> |
| (other) Convert to Water Injection | <input type="checkbox"/> | <input type="checkbox"/> |

5. LEASE  
LC 028772 D
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME  
Ballard Grayburg San Andres Unit
8. FARM OR LEASE NAME  
Tract 3
9. WELL NO.  
1
10. FIELD OR WILDCAT NAME  
Loco Hills Queen Grayburg San Andres
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 7 18S - 29E
12. COUNTY OR PARISH  
Eddy
13. STATE  
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3564.6 GL

(None) Report results of multiple completion or zone change on Form 9-330

DEC 10 1982

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. MIRUPU
2. TOH w/Rods & 2-3/8" Tbg.
3. TIH w/Injection Pkr. on 2-3/8" Salta Tbg.
4. Set Pkr. Pressure Test Annulus to N.M.O.C.C. Specifications
5. Unset Pkr. - Load Annulus w/Pkr. Fluid.
6. Equip well for water injection.
7. Commence Water Injection in accordance with NMOCC order #7000.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED \_\_\_\_\_ TITLE Prod. Engineer DATE \_\_\_\_\_

APPROVED BY (Orig. Sgd.) PETER W. CHESTER (This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

DEC 14 1982

FOR  
JAMES A. GILLHAM  
DISTRICT SUPERVISOR

\*See Instructions on Reverse Side

Posted 12-31-82  
chq. to W&W