

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NAME
OF COPIES REQUIRED
(Other instructions on re-
verse side)

MM Roswell District
Modified Form No.
NMXO-3160-4

CLSF

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		MAY -2 '90		7. UNIT AGREEMENT NAME Ballard-GB-SA-Unit	
2. NAME OF OPERATOR Anadarko Petroleum Corporation		3a. Area Code & Phone No. (505) 748-3368		8. FARM OR LEASE NAME Tract No 3	
3. ADDRESS OF OPERATOR P.O. Drawer 130, Artesia, New Mexico 88211-0130		ARTESIA, OFFICE		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1709' FNL & 2234' FEL		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3559.5' GL		10. FIELD AND POOL, OR WILDCAT Loco Hills-Qn-GB-SA	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3559.5' GL		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 7-T18S-R29E	
				12. COUNTY OR PARISH Eddy	
				13. STATE New Mexico	

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANE	<input type="checkbox"/>	(Other) Temporarily Abandon	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>			(Note: Report results of multiple completion on Well Completion or Reconpletion Report and Log form.)	

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.)

NOTE: This well in our Ballard Waterflood was making over 400 bbl. water and 10 bbl. oil. TAd well to change water injection pattern. Will wait and see how surrounding wells respond before deciding to re-open well or P&A.

1. RUPU. TOH with rods and tbg.
2. Ran tbg., set CIBP and set at 2420'. (53' above perfs).
3. Circulated hole with chemical water and tested casing to 500#.
4. TOH with tbg and packed off wellhead with 6' sub in head.
5. RDPU.

RECEIVED
APR 4 11 10 AM '90
CATTLE
AREA

APR 12 1990
4/30/91

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

SIGNED <u>Mike Brannell</u>	TITLE <u>Field Foreman</u>	DATE <u>4/03/90</u>
(This space for Federal or State office use)		
APPROVED BY <u>Chris Sullivan, Asst. Manager</u>	TITLE <u>Asst. Manager</u>	DATE <u>4/27/90</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side