_ '	<del>-</del> -			Form approved.	
Form 3160-5 (November 19 (Formerly 9-	(983)		SUBMIT IN TRIF ATE (Other lustructions )n re	Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO.	
	BUREAU OF LAND	MANAGEMEN <sup>-</sup>	RECEIVED	LC - 058581	
(Do n	SUNDRY NOTICES AND	REPORTS O	ON WELLS TUION	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
1.	ot use this form for proposals to drill or to Use "APPLICATION FOR PER	MIT—Afor such h	pposals.) IIII 19 189	7 UNIT AGRESIAN BUILD	
OIL C	WELL OTHER X - Water	Injecțio	on (Well	7. UNIT AGREEMENT NAME Ballard Grayburg-San Andres Uni	
2. NAME OF			ARE.	8. FARM OR LEASE NAME	
3. ADDRESS O	arko Petroleum Corpora	tion v	RECEIVED	Tract No. 10	
P. O  4. Location See also s At surface	. Drawer 130, Artesia, or WELL (Report location clearly and in accepace 17 below.)	NM 8821	O State requirements 14 '89	10. FIELD AND POOL, OR WILDCAT	
			22 <b>6</b>	Loco Hills-Queen-G-SA  11. SMC., T., B., M., OR BLK. AND BURNET OR ARM	
	2205' FNL & 1310' FW	L	ARTESIA, OFFICE		
14. PERMIT N	0. 15. BLEVATIONS	(Show whether DF		4 - 18S - 29E 12. COUNTY OR PARISH 13. STATE	
_ ~	353	6.1' GL		Eddy New Mexico	
16.	Check Appropriate Box	To Indicate N	lature of Notice, Report, or	Other Data	
	NOTICE OF INTENTION TO:		SUBS#	QUENT REPORT OF:	
TEST WA	TER SHUT-OFF PULL OR ALTER C	121.20	WATER SHUT-OFF	REPAIRING WELL	
FHACTUR	[ <del></del> ]	ETE	FRACTUBE TREATMENT	ALTERING CASING	
SHOOT OF			SHOOTING OR ACIDIZING	ABANDONMENT*	
REPAIR W	Change Injectivity Pr	ofile.X	(Nork: Report result	is of multiple completion on Well pletion Report and Log form.)	
propose	PROPOSED OR COMPLETED OPERATIONS (Clearly dwork. If well is directionally drilled, given work.).	state all pertinen e subsurface loca	t details, and give pertinent date	s, including estimated date of starting any	
NOTE:	Ran and Injectivity going into Metex pay			it showed all water	
1.	Rig up pulling unit.	TOH.			
2.	Set CIBP between mete				
<ol> <li>Set cement retainer above metex perfs and cement squeeze.</li> <li>Drill out cement and CIBP.</li> </ol>					
5.					
6. GIH with packer on plastic coated tubing and circulated fresh					
	water and chemical.		er and test casing	g to 500# in	
-	accordance with NMOCD	rules.			
7.	Return to injection.				
	certify that the foregoing is true and correct	et	niald name	2/7/00	
SIGNED .	/ run Durwer	TITLE	Field Foreman	DATE 3/7/89	
(This spa	ce for Federal or State office use)			2 12 84	
APPROVI	ED BY CHILL	TITLE		DATE 3-13.89	