

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Ent. Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-015-29267

5. Indicate Type of Lease
Federal ☐ STATE ☐ FEE ☐

6. State Oil & Gas Lease No.
NM 14844

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 "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
Ballard Grayburg
San Andres Unit
Tract #21

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

8. Well No.
3

2. Name of Operator
Anadarko Petroleum Corporation 000817

9. Pool name or Wildcat 39520
Loco Hills On GB SA

3. Address of Operator
PO Box 37, Loco Hills, NM 88255

4. Well Location
Unit Letter I : 1560 Feet From The South Line and 1235' Feet From The East Line
Section 8 Township 18S Range 29E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3527' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Brought Braidenhead Risers to Surface ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Mr. Ray Smith, NMOCD Inspector, came out and inspected and approved risers in cellars on Ballard wells: #5-18, #6-20, #14-8, #21-3 and #25-5, on 6-20-97.

2. Filled in cellars to ground level.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Howard Hackett TITLE Field Foreman DATE 06-30-97
TYPE OR PRINT NAME Howard Hackett TELEPHONE NO. 505/677-2411

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

JUL 17 1997

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: