

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

*Wrong Form*

WELL API NO.

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

6. State Oil & Gas Lease No.  
LC-061701

7. Lease Name or Unit Agreement Name

Ballard Grayburg  
San Andres Unit  
Tract #14

8. Well No.  
8

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

**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.)

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

2. Name of Operator  
Anadarko Petroleum Corporation 000817

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

4. Well Location  
Unit Letter K : 2560 Feet From The South Line and 1500 Feet From The West Line

Section 8 Township 18S Range 29E NMPM Eddy County

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

3530' 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.

*RECEIVED*  
*JUN - 8 1997*  
*Oil Conservation Division*

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**

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

CONDITIONS OF APPROVAL, IF ANY:

**JUN 8 1997**