

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

**SUBMIT IN TRIPLICATE**

1. Type of Well

Oil Well  Gas Well  Other

2. Name of Operator

Anadarko Petroleum Corporation

3. Address and Telephone No.

P.O. Drawer 130, Artesia, New Mexico 88211-0130

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FNL & 1980' FEL  
Sec. 29 - T13S - R31E

5. Lease Designation and Serial No.

NM-080128

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Oxy Federal Com. 1

9. API Well No.

10. Field and Pool, or Exploratory Area (Asso)  
Chaves Qn Gas Area SE

11. County or Parish, State

Chaves, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION                                   | TYPE OF ACTION                                      |
|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment                |
| <input type="checkbox"/> Subsequent Report           | <input type="checkbox"/> Recompletion               |
| <input type="checkbox"/> Final Abandonment Notice    | <input type="checkbox"/> Plugging Back              |
|  | <input type="checkbox"/> Casing Repair              |
|  | <input type="checkbox"/> Altering Casing            |
|  | <input type="checkbox"/> Other _____                |
|  | <input checked="" type="checkbox"/> Change of Plans |
|  | <input type="checkbox"/> New Construction           |
|  | <input type="checkbox"/> Non-Routine Fracturing     |
|  | <input type="checkbox"/> Water Shut-Off             |
|  | <input type="checkbox"/> Conversion to Injection    |
|  | <input type="checkbox"/> Dispose Water              |

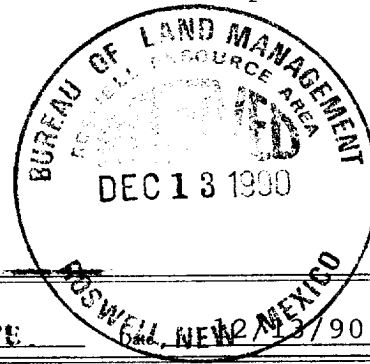
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

Capstar Drilling Co has requested the following changes:

- (1) reduce reserve pit depth.
- (2) use the small pit near the SW corner of the reserve pit as a trash pit.
- (3) build another pit near the SE corner of the reserve pit as a fresh water pit.
- (4) reduce the distance from the wellbore to the reserve pit from 25' to 20'.

SEE attached new location diagram.



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

Signed [Signature]

Title Area Supervisor JOHN ESCRANE

(This space for Federal or State office use)

Approved by \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any:

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

RECEIVED  
DEC 1 1964

RECEIVED

DEC 1 1964

RECEIVED  
DEC 1 1964

RECEIVED