

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR
Anadarko Petroleum Corporation

3. ADDRESS OF OPERATOR
P.O. Box 806 Eunice, NM 88231

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL & 660' FWL
AT TOP PROD. INTERVAL: "
AT TOTAL DEPTH: "

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) Perforate upper Delaware Zone		

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.)*

1. RUPU TOH w/production string.
2. TIH w/ RBP & set @ 6900' & dump 2 SX of sand on top.
3. Spot 200 gals 7½% acetic acid from 6430' to 6230'. TOH.
4. RU perforator & perforate upper Delaware w/ 1 SPF @ 6390, 6388, 6366, 6364, 6362, 6360, 6358, 6356, 6354, 6336, 6334. RD perforator.
5. TIH w/ 5½" PKR on 2 7/8" tbg & set @ 6200' & swab test.
6. Acidize new perms w/ 1100 gals of 15% Ne-Fe acid w/clay master-4 using 20 ball sealers. Over flush 5 Bbls w/2% KCL wtr.
7. Swab test.
8. Frac pending results of swab test.
9. TIH w/ production string. POP. RDP.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Howard E. Schmitt TITLE Field Foreman DATE 3-28-88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 4-7-88
CONDITIONS OF APPROVAL, IF ANY:

5. LEASE NM35612	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Polewski Fed	
9. WELL NO. 1	
10. FIELD OR WILDCAT NAME West Lusk-Delaware	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 31, T 19S, R 32E	
12. COUNTY OR PARISH Lea	13. STATE NM
14. API NO. 300 025 20161	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 3518.0 GL	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

RECEIVED
MAR 28 10 57 AM '88
CATT
AREA