

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 Water Injection Well
2. NAME OF OPERATOR
Anadarko Production Company
3. ADDRESS OF OPERATOR
P.O. Box 806 Eunice, New Mexico 88231
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990' FNL & 2310' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

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☐

(other) Perforate base of salt & cement squeeze.

5. LEASE
NM 0435
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
Teas Yates Unit
8. FARM OR LEASE NAME
Tract 11
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Teas
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 14, Twp 20S, Rq 33E
12. COUNTY OR PARISH
Lea
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3592' GR

RECEIVED
NOV 10 1982

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

OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO

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/2-3/8" PVC lined tbg & 5 1/2" PKR.
2. RU Perforator. Perforate @ 2995', Base of Salt.
3. TIH w/Retrievable Bridge Plug & PKR. Set RBP @ 3050', sand off w/50 sx of sand. Set PKR @ 2990'. Squeeze w/100 sx Class C Cement. Circ out excess cement & sand. Retrieve RBP & TOH w/RBP & PKR.
4. TIH w/Injection PKR & PVC lined tbg. Circ hole w/PKR fluid. Set PKR @ 3150'. Return to water injection.
5. RDPU.

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

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

SIGNED Howard D. Thacker TITLE Production Foreman DATE November 8, 1982

APPROVED

(This space for Federal or State office use)

APPROVED BY James A. Gilham TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NOV 12 1982

FOR
JAMES A. GILHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side