Form 3160-5 (June 1990)

TED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.

NM 17238 6. If Indian, Allottee or Tribe Name

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			7. If Unit or CA, Agreement Designation		
1. Type	Oil Con				
\square	Oil Gas Well Other	8. Well Name and No.			
	of Operator	Anaconda 11 Federal #2			
	burg Producing Company	9. API Well No.			
	ss and Telephone No.	30-025-34934			
3300	North A Street, Building 2, Suite 120, Mid	10. Field and Pool, or Exploratory Area			
	on of Well (Footage, Sec., T., R., M., or Survey Desc	Teas Bone Spring			
1650	FNL and 1650' FWL, Section 11, T20S, F	11. County or Parish, State			
			Loo County No. 14		
12.	CHECK APPROPRIATE ROY(s)	TO INDICATE MATURE OF MOTION	Lea County, New Mexico		
	CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
	TYPE OF SUBMISSION	TYPE OF ACTION			
	Notice of Intent	Abandonment	Change of Plans		
	No.	Recompletion	New Construction		
	Subsequent Report	Plugging Back	Non-Routine Fracturing		
	Fig. 141	Casing Repair	Water Shut-Off		
	Final Abandonment Notice	Altering Casing	Conversion to Injection		
		Other Production Casing and Cemen	Stopood Water		
			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)		
usnig	1077 sx cmt + additives. Cement 2nd sta c, jet pits and released rig at 1500 hrs on 0	d ran 254 jts of 5-1/2", 17#, J55, N80, ST&C casing ge using 286 sxs cmt + additives. Circ 46 sx cmt to 7/09/00.	o surface. Set slips, cut off csg, ND		
14 herei	by certify that the forecoing is true and correct	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	CCEPTED FOR RECORD ER W. CHESTER L 17 2000 LAND MANAGEMENT RESOURCE AREA		
14. I herel Signed	by certify that the foregoing is true and correct	Title Regulatory Analyst	7		
	ce for Federal or State office use)	/ Iitle Regulatory Alidiyst	Date 07/10/00		
Approved	•	Title	Data		
Condition	is of approval, if any:	1100	Date		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



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Job separation sheet

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ES Hobbe, MAI State Budget Bureau N

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1. Type	0.1			
2. Name	Oil Gas Well Well Other of Operator	8. Well Name and No. Anaconda 11 Federal #2		
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12.	CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
	TYPE OF SUBMISSION	BMISSION TYPE OF ACTION		
	Notice of Intent	Abandonment	X Change of Plans	
	57 -	Recompletion	New Construction	
	Subsequent Report	Plugging Back	Non-Routine Fracturing	
	Final Abandonment Notice	☐ Casing Repair	Water Shut-Off	
	Final Abandonment Notice	☐ Altering Casing	Conversion to Injection	
		Other	Dispose Water	
			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
Neart appro	ourg Producing Company has drilled to a depi eval of this depth.	$B_{l/R}$ to	APPROVED PETER W. CHESTER JUL 1 7 2000 VELL RESOURCE AREA	
Signed (This sp.	eby certify that the foregoing is true and correct ace for Federal or State office use) d by	Title Regulatory Analyst Title	Date 07/10/00	

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