Form 3160-5 (November 1983) (Formerly 9-331)

Budget Bureau No. 1004-0135 Expires August 31, 1985

DUKEAU UF	LAND MANAGEMENT	WECEIVED-	INTI	33012
			G IF INDIAN	ALLOTTEE OR TRIBE NAME
CHAIDDY MOTICES	A KID DEDODTS ON	J WELLS	· ·	

	(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)	
1.	the state of the s	7. UNIT AGREEMENT NAME
	WELL WELL OTHER C.	
2.	NAME OF OPERATOR	8. FARM OR LEASE NAME
	Anadarko Petroleum Corporation	Polewski Federal
3.	ADDRESS OF OPERATOR	9. WELL NO.
	P. O. Drawer 130, Artesia, New Mexico 88211-0130	2
4.	LOCATION OF WELL (Report location clearly and in accordance with any State requirements.	10. FIELD AND POOL, OR WILDCAT
	See also space 17 below.) At surface	Lusk-Delaware, West
	610' FNL & 1980' FWL Sec. 31, T 19S R32E	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
		Sec. 31, T19S, R32E
14.	PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	3522.6 GR	Lea NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
	er in s		r 1		1		
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF REPAIRING WELL			
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTUBE TERATMENT ALTERING CASING			
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING ABANDONMENT*			
CEPAIR WELL		CHANGE PLANS		(Other)	!		
Other) Re-file	e APD		X	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

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.) *

The APD for this well expires March 16, 1989. Anadarko would like the extend it for one more year.

SIGNED Mile Barancel		Field Foreman	DATE 3/3/89
(This space for Federal or State office use)			2 12 CG
APPROVED BY CHARLES SLEED UNCES	TITLE _		DATE 3-13.89
CONDITIONS OF APPROVAL, IF ANY:			
		American Control C	CR/2 MONTH PERIOD

*See Instructions on Reverse Side