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UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LC-060325

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 "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED
OCT 6 1978
O. C. C.
ARTESIA, OFFICE

1. OIL WELL XX GAS WELL ☐ OTHER

2. NAME OF OPERATOR: NEWMONT OIL COMPANY

3. ADDRESS OF OPERATOR: P.O. Box 1305, Artesia, New Mexico 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1980' FSL & 660' FEL of Section 33

7. UNIT AGREEMENT NAME: Square Lake Flood (West)

8. FARM OR LEASE NAME: Leonard "E"

9. WELL NO.: 2

10. FIELD AND POOL, OR WILDCAT: SQUARE LAKE (G.SA)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 33-16S-30E NMPM

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3734' GLM

12. COUNTY OR PARISH: Eddy

13. STATE: New Mexico

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Temporary Abandonment			XX
(Other)							

(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.) *

We request an extension of approval for Temporary Abandonment for one year. This property is under study for tertiary recovery operations.

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ARTESIA, N. MEX.

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

SIGNED [signature] TITLE Office Manager DATE 9/29/78

(This space for Federal or State office use)

APPROVED BY [signature] TITLE ACTING DISTRICT ENGINEER DATE OCT - 4 1978

CONDITIONS OF APPROVAL, IF ANY:

UNLESS FURTHER APPROVED, WELL MUST BE PUT TO BENEFICAL USE OR PLUGGED
Their Actions OCT 1 - 1979

*See Instructions on Reverse Side