

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TYPE
(Other instructions on reverse side)

ICATE*

Form approved.
Budget Bureau No. 42-R1424.

6. LEASE DESIGNATION AND SERIAL NO.

NM-02425

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 plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> WIW	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	Square Lake Flood (West)
3. ADDRESS OF OPERATOR	8. FARM OR LEASE NAME
NEWMONT OIL COMPANY	Evans
P.O. Box 1305, Artesia, New Mexico 88210	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	8
1980' FSL & 660' FWL of Section 33	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.	12. COUNTY OR PARISH
	Eddy
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	13. STATE
3729' GLM	New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Temporary Abandonment

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

S/ 3-73

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

RECEIVED

OCT 22 1975

O. C. C.
ARTESIA, OFFICE

RECEIVED

SEP 11 1975

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Ernest J. Gonzales

TITLE

Office Manager

DATE

9-11-75

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL, OCTOBER 1976
See Instructions on Reverse Side