

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY  
ARTESIA, NM 88210

Form approved.  
Budget Bureau No. 42-R1424.  
G. LEASE DESIGNATION AND SERIAL NO.

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"/> <u>WIW - SI</u>	6. LEASE DESIGNATION AND SERIAL NO. <u>LC 060543</u>
2. NAME OF OPERATOR <u>Newmont Oil Company</u>	7. UNIT AGREEMENT NAME <u>Square Lake Flood (East)</u>
3. ADDRESS OF OPERATOR <u>P. O. Box 1305 Artesia, New Mexico 88210</u>	8. FARM OR LEASE NAME <u>Bruning</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <u>At surface</u> <u>1980' FSL and 660' FEL of Sec. 29</u>	9. WELL NO. <u>5</u>
14. PERMIT NO.	10. FIELD AND POOL, OR WILDCAT <u>Square Lake (G. SA)</u>
15. ELEVATIONS (Show whether DF, RT, OR, etc.) <u>3970' GLM</u>	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 29-16S-31E</u>
	12. COUNTY OR PARISH <u>Eddy</u> 13. STATE <u>New Mexico</u>

MAR 22 1983

O. C. D.

ARTESIA, OFFICE

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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 above well was plugged and abandon as follows.....

9/5/82.....Spotted 50 sacks cement plug.

9/8/82.....Tag bottom plug at 2794' psi to 1000#.....Perf base of salt @ 1635'. Squeeze w/50 sacks cement....psi to 1000.

9/9/82.....Tag plug at base of salt 1466'. Pressure up 500#. Perf top of salt 675'. Squeeze with 240 sacks cement. Circ. 15 sacks to pit.

9/10/82....Tag plug at 241' psi 800#. Put up dry hole marker

Location ready for inspection

RECEIVED  
JAN 17 1983

OIL & GAS  
U.S. GEOLOGICAL SURVEY  
ROSWell, NEW MEXICO

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

SIGNED

*E. J. McLaughlin*

TITLE Area Manager

DATE 1/12/83

(This space for Federal or State agency use)

APPROVED BY:

CONDITIONS OF APPROVAL, IF ANY:

FOR

JAMES A. GILHEAN  
DISTRICT SUPERVISOR

\*See Instructions on Reverse Side