

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN
ORIGINAL
DRAWING
ARTESIA, NM 88210

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

LC 056302 (b)
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 an old reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED

1. OIL ☐ GAS ☐ OTHER ☐ WIW - TA MAR 22 1983

2. NAME OF OPERATOR

Newmont Oil Company

O. C. D.

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

660' FNL & 660' FEL of Sec. 33

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4001

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

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)

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.)*

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

7/16/82.....Set B.P. at 3372' and capped w/25 sacks cement. Perf base of salt @ 1745' and squeezed w/50 sacks cement.

7/17/82.....Tagged top of plug @ 1599'. Perf top of salt at 765'. Squeezed w/120 sacks cement.

7/18/82.....Tagged plug at top of salt 540'.

8xx surface plug
Set dry hole surface marker

Location ready for inspection

RECEIVED

JAN 26 1983

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

SIGNED

Emmet J. Gillham

TITLE Area Manager

DATE 1/25/83

(This space for Federal or State use only)

APPROVED BY

James A. Gillham

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 18 1983

FOR

JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side

Ported 12-18-83
H. P. A.