UN ED STATES SUBMIT IN TRIP (Other instructions TE* DEPARTMENT OF THE INTERIOR Verse side) - GEOLOGICAL SURVEY SUNDRY NOTICES AND REPORTS ON WELLS					Form approved. Budget Bureau No. 42-R1424 5. LEANE DESIGNATION AND BERIAL NO. LC 056302 (b) 6. IF INDIAN, ALLOTTEE OR TRIBE NAME								
(Do not use this form Use	for proposals to drill or to deepe "APPLICATION FOR PERMIT_"	n or plug back t	o a different reservoir										
1. OIL GAS WELL OTHER					7. UNIT AGREEMENT NAME								
2. NAME OF OPERATOR				8. FARM O	8. FARM OR LEASE NAME								
Newmont 0il 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 732					Johnson 9. Well NO. 10. FIELD AND FOOL, OR WILDCAT Square Lake 11. SEC. T. B. M. OR BLK. AND								
							2310' FSL & 1650' FEL of Sec. 22; T-16S; R-31E				SUR	Sec. 33-165-31E NMP	
							14. PERMIT NO.	15. ELEVATIONS (Show	whether DF, RT, G	R, etc.)		Y OR PARISH	
					Eddy	New Mex							
16. C	heck Appropriate Box To li	ndicate Natur	e of Notice, Report, o	r Other Data									
NOTICE	OF INTENTION TO :		SUB	SEQUENT REPORT	or:								
TEST WATER SHUT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WE	ELL							
FRACTURE TREAT	MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CAS	BING							
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING		ABANDONMENT	r*							
REPAIR WELL	CHANGE PLANS		(Other) Shut in										
nent to this work.)*	PLETED OPERATIONS (Clearly state is directionally drilled, give subs	uriace locations :	and measured and true ver	mpletion Report	and Log forn	n.)							
17. DESCRIBE FROPOSED OR COMP proposed work. If well nent to this work.)*	is directionally drined, give subs	uriace locations :	Completion or Reco ails, and give pertinent da and measured and true ver	mpletion Report	and Log forn	n.)							
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