

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TR. .CATE\*  
(Other instructions on re-  
verse side)

Copy to 17

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

16-056302(b)

6. IF INDIAN, ALLIOTTEE 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Square Lake Flood (East)	
2. NAME OF OPERATOR HEYMONT OIL COMPANY ✓		8. FARM OR LEASE NAME Johnson	
3. ADDRESS OF OPERATOR P.O. Box 1305, Artesia, New Mexico 88210		9. WELL NO. 15	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  2310' FSL & 1650' FEL of Section 33		10. FIELD AND POOL, OR WILDCAT SQUARE LAKE (G.SA)	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 33-16S-31E NMPM	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3973' 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

FULL 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.) \*

SI 3-70

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

RECEIVED

OCT 22 1975

O. C. C.  
ARTESIA, OFFICE

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

SIGNED

*Robert J. McLaughlin*

TITLE

Office Manager

DATE

9-11-75

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

OCT 2 1975  
H. L. BEEKMAN  
ACTING DISTRICT ENGINEER

UNLESS FURTHER APPROVED, WELL MUST  
BE PUT TO USE OR PLUGGED BY  
OCT 1 - 1976

DATE

\*See Instructions on Reverse Side