	Ň	M. O. C	; C COON -	C	ery to S/=
May 1963)	un ed state EPARTMENT OF THE	S	SUBMIT IN TRIE		reau No. 42-R1424.
_	GEOLOGICAL SUF			LC-060548	
SUNDR (Do not use this form Us	Y NOTICES AND REP	ORTS ON a or plug back to for such propose	WELLS of a different reservoir.	6. IF INDIAN, ALLOTT	EE OR TRIBE NAME
1.		F	RECEIVE		
WELL GAS WELL C. NAME OF OPERATOR	OTHER			Square Lake	
NEWMONT OIL COMPA	ANY /	· 	DEC 5 1974	Johnson A	
3. ADDRESS OF OPERATOR				3	
P.O. SOX 1305, 4. incarion on well (Report See also space 17 below.)	t location clearly and in accordance	with any State	requirements. OFFICE	10. FIELD AND POOL,	
At surface		Square Lake (G.SA)			
1900. FAL & 1900	)' FWL of Section 33			SURVEY OR AR	ZZĄ
				33-16S-31E	NMPM
14. PERMIT NO.	15. ELEVATIONS (Show		ir, etc.)	12. COUNTY OR PARI	Hew Mexico
16.	Check Appropriate Box To I	ndicate Natur	e of Notice, Report, o	r Other Data	
NOTI	CE OF INTENTION TO:		SUBS	EQUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING	G WELL
FRACTURE TREAT	MULTIPLE COMPLETE		FRACTURE TREATMENT	ALTERING	
SHOOT OR ACIDIZE REPAIR WELL	ABANDON* CHANGE PLANS		SHOOTING OR ACIDIZING	ABANDON	dent-
(Note: Report resul			ts of multiple completion on Well pletion Report and Log form.)		
This well was sh		uriace locations	nomic limit. We	e intend to temp	eers and zones peru-
abandon this wel	l and hold for furthe	er evaluat	ion within the n	next two years.	
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				ار داد. معمولیا در از	
				The second se	FIVED
				REC	CEIVED
				00	37 2 9 1974 37 2 9 1974
				U.S. G	CT 29 19 SURVEY ECLOSICAL SURVEY MEXICO
				No.	-

18. I hereby certify that the foregoing is true and	d correct	DATE 10-28-74
(This space for Federal on State office uso)  A CONDITIONS OF APPROVAL, IF ANY:	TITLE WELL MIST	DATE
DEC 4 UNLESS BEEKINGS BEEKINGS BE PUT APRIL	FURTHER APPROVED. WELL MUST  TO BENIFICAL USE OR PLUGGED BY  TO BENIFICAL USE OR PLUGGED BY  OCTOPER 1975  See Instructions on Reverse Side	
ACTIVE DISTRICT		-