

NMOCC CORP. UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

PERMIT IN THE STATE OF
NEW MEXICO

Copy to 57
42 H3424
LC-063368

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug holes. Use different form.)
Use "APPLICATION FOR PERMIT—" for each proposal.

RECEIVED

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ WIW

2. NAME OF OPERATOR
NEWMONT OIL 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

1270' FNL & 1650' FEL of Section 33

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3983' GR.

7. UNIT AGREEMENT NAME
Square Lake Flood (East)

8. FARM OR LEASE NAME
Texas Trading

9. WELL NO.
8

10. FIELD AND POOL, OR WILDCAT
Square Lake (G.S.A.)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 33, T16S, R31E. NMPM

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:

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) ☒ Repair of Tubing Leak

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.)*

4-15-78 -- Rigged up pulling unit, pulled tubing locating hole in 38th joint. Replaced joint ran tubing back and put well on injection.

RECEIVED

APR 19 1978

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Ernest J. McLaughlin

TITLE

Office Manager

DATE

4/18/78

(This space for Federal or State office use)

APPROVED BY

W. C. J. Davis

TITLE

ACTING DISTRICT ENGINEER

DATE

APR 25 1978

CONDITIONS OF APPROVAL, IF ANY: