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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

RECEIVED

SEP 11 1975

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-85

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-2884

SUNDY 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
NEWMONT OIL COMPANY ✓	Continental State
3. Address of Operator	9. Well No.
P.O. Box 1305, Artesia, New Mexico 88210	3
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER C, 660 FEET FROM THE North LINE AND 1980 FEET FROM	SQUARE LAKE (G.SA)
THE West LINE, SECTION 36 TOWNSHIP 16S RANGE 30E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3788' GLM	Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

51-4-9-75

We request approval to Temporarily Abandon this well and hold for possible tertiary recovery operations.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Ernest J. McLaughlin TITLE Office Manager DATE 9-11-75

APPROVED BY W.A. Gressett SUPERVISOR, DISTRICT II TITLE  DATE OCT 8 1975

CONDITIONS OF APPROVAL, IF ANY: Expires 10-1-76