

U. S. DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. O. C. C. COPY
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Copy to SF

Form approved.
Budget Bureau No. 42-R1424.

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.)

| | |
|---|--|
| <p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR NEWMONT OIL COMPANY</p> <p>3. ADDRESS OF OPERATOR P.O. Box 1305, Artesia, New Mexico</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface</p> <p style="text-align: center;">1980' FSL & 660' FEL of Section 4</p> <p>14. PERMIT NO.</p> <p>15. ELEVATIONS (Show whether DF, ARTESIA, OFFICE) 3713' GLM</p> | <p>5. LEASE DESIGNATION AND SERIAL NO. LC-060325</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME Square Lake Flood (West)</p> <p>8. FARM OR LEASE NAME Leonard "E"</p> <p>9. WELL NO. 14</p> <p>10. FIELD AND POOL, OR WILDCAT Square Lake (G.SA)</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 4-17S-30E NMPM</p> <p>12. COUNTY OR PARISH Eddy</p> <p>13. STATE New Mexico</p> |
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16. **Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:

| | |
|--|--|
| <p>TEST WATER SHUT-OFF <input type="checkbox"/></p> <p>FRACTURE TREAT <input type="checkbox"/></p> <p>SHOOT OR ACIDIZE <input type="checkbox"/></p> <p>REPAIR WELL <input type="checkbox"/></p> <p>(Other) Return to Production <input checked="" type="checkbox"/></p> | <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>MULTIPLE COMPLETE <input type="checkbox"/></p> <p>ABANDON* <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> |
|--|--|

SUBSEQUENT REPORT OF:

| | |
|--|--|
| <p>WATER SHUT-OFF <input type="checkbox"/></p> <p>FRACTURE TREATMENT <input type="checkbox"/></p> <p>SHOOTING OR ACIDIZING <input type="checkbox"/></p> <p>(Other) <input type="checkbox"/></p> | <p>REPAIRING WELL <input type="checkbox"/></p> <p>ALTERING CASING <input type="checkbox"/></p> <p>ABANDONMENT* <input type="checkbox"/></p> |
|--|--|

(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.)*

We will return this well to production to evaluate flood response in this area.

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U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED Ernest J. McShanagill TITLE Office Manager DATE 2-1-77

(This space for Federal or State office use)

APPROVED BY Joe S. Lara TITLE ACTING DISTRICT ENGINEER DATE FEB 7 1977

CONDITIONS OF APPROVAL, IF ANY: