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NEW MEXICO OIL CONSERVATION COMMISSION

RECEIVED

SEP 11 1975

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>

5. State Oil & Gas Lease No.
NM B 4108

SUNDRY NOTICES AND REPORTS ON WELLS

O. O. C.
ARTESIA, OFFICE

(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 Loco Hills Flood
2. Name of Operator NEWMONT OIL COMPANY	8. Farm or Lease Name Tallmadge
3. Address of Operator P.O. Box 1305, Artesia, New Mexico 88210	9. Well No. 1
4. Location of Well UNIT LETTER N 990' FEET FROM THE South LINE AND 1650 FEET FROM THE West LINE, SECTION 32 TOWNSHIP 17S RANGE 30E NMPM.	10. Field and Pool, or Wildcat LOCO HILLS (Q.G.SA)
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Eddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER Temporary Abandonment <input checked="" 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 1103.

51-9-66

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

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

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

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

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