

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRI  
(Other Instructio  
verse side)DATE  
on reForm approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-058480

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

W. Loco Hills Grb. #4 Sd Ut

8. FARM OR LEASE NAME

Tract 10A

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Loco Hills (Q.G.SA)

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

3-18S-29E NMPM

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

## 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.)1. OIL ☐ GAS ☐ OTHER ☒ WIW

RECEIVED

2. NAME OF OPERATOR

NEWMONT OIL COMPANY ✓

FEB 18 1976

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

ARTESIA, OFFICE

2310' FNL &amp; 990' FWL of Section 3

14. PERMIT NO.

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

3510' GLM

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) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐Status Report ☒(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.)\*

This well was returned to injection on 12-17-74 and is still on injection.

RECEIVED  
FEB 12 1976  
U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

TITLE

Office Manager

DATE

2/12/76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side