

COPIES RECEIVED	3
DISTRIBUTION	
FE	
FILE	1
U.S.G.S.	1
LAND OFFICE	
OPERATOR	1

RECEIVED

NEW MEXICO OIL CONSERVATION COMMISSION

APR - 4 1979

O. C. C.
ARTESIA, OFFICE

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

5a. Indicate Type of Lease State <input type="checkbox"/> Federal <input type="checkbox"/>
5. State Oil & Gas Lease No. LC-058480

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 -" (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 W. Loco Hills G4S Ut
2. Name of Operator Newmont Oil Company ✓	8. Farm or Lease Name Tract 10B
3. Address of Operator P. O. Box 1305 - Artesia, New Mexico 88210	9. Well No. 3
4. Location of Well UNIT LETTER <u>H</u> , <u>2310</u> FEET FROM THE <u>FNL</u> LINE AND <u>330</u> FEET FROM THE <u>FEL</u> LINE, SECTION <u>3</u> TOWNSHIP <u>18</u> RANGE <u>29</u> NMPM.	10. Field and Pool, or Wildcat Loco Hills (Q-G-SA)
15. Elevation (Show whether DF, RT, GR, etc.)	12. County 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 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 JOBS <input type="checkbox"/>	OTHER <u>Bradenhead to surface</u> <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.

1" on clamp to surface - no valves

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

SIGNED <u>Ernest J. McElroy</u>	TITLE <u>Office Manager</u>	DATE <u>3/30/79</u>
APPROVED BY <u>B. W. Weaver</u>	TITLE <u>OIL AND GAS INSPECTOR</u>	DATE <u>MAY 18 1979</u>
CONDITIONS OF APPROVAL, IF ANY:		