с. -			LOT Form approved. 45F
Form 9-331	L' TED STATES	NM OTHER Destroy is on	Budget Bureau No. 42-R1424,
RECE. EU OY	DEPARTMENT OF THE INT	0.0070	5. LEARE DENIGNATION AND BERIAL NO.
· ·	GEOLOGICAL SURVEY	Artesia, NM 28210	LC 059954 G. IF INDIAN, ALLOTTEE OR TRIME NAME
OCT 23 1985UND	RY NOTICES AND REPORT	S ON WELLSNED	
(Do not use this fo	In for proposals to drill or to deepen or p the "APPLICATION FOR PERMIT-" for su	inch proposais.)	
	D. I Kto	DOT 11 12 52 AM US	7. UNIT AGREEMENT NAME
ARTESIA OFFICE	OTHER WIW - TA	ULT	West Loco Hills Grb #4 SD
2. NAME OF OPERATOR		BUR. OF LAND HONOT ROSWELL SISTRICT	B. FARM OR LEASE NAME Ut Tract 12
Newmont (911 Company Vates Pet. 6	A.C. RUSHELL	9. WELL NO.
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.*			10. FIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface			Loco Hills (Q.G.Sa).
			11. SEC., T., E., M., OF BLK. AND BURVEY OR AREA
2310' FSL 330 FEL Sec. 9-18-29			Sec. 9-18-29
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			12. COUNTY OR PARISH 13. STATE
14, PERMIT NO.	15. ELEVATIONS (Snow wheth	er DF, KI, GR, EUC.J	
			Eddy
16.	Check Appropriate Box To Indicat	e Nature of Notice, Report, or	Other Data
NO	TICE OF INTENTION TO:	SUB81	QUENT REPORT OF :
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE		SHOOTING OR ACIDIZING (Other)	ABANDONMENT*
(Other)	CHANGE PLANS	(NOTE : Report resul	ts of multiple completion on Well apletion Report and Log form.)
17. DESCRIBE PROPOSED OR CO	OMPLETED OPERATIONS (Clearly state all pert	inent details, and give pertinent date	s, including estimated date of starting any
proposed work. If w nent to this work.) *	ell is directionally drilled, give subsurface	locations and measured and true vert	icnl depths for all markers and zones perti-
	ttom. Mixed 2 sxs paper an		
	-		Pulled pkr to 598'. Pumped
	, using hole in pipe as per	-	
pressure. WOC. 3 hrs. Pressure tested plug, no plug. Squeeze SI w/no pressure. WOC.			eezeu Jo SKS Cmt w/2% Galcium.
			l by 100 sks cmt w/2% Calcium
and 1 sk cottonseed hulls mixed in cmt. WOC. Pressure tested plug. No plug. Mixed			
	er followed by 100 sks cmt olug. Mixed 3 sks paper -		NOC. 3 hrs. Pressure tested
Mixed in c		squeezed 100 sks cmt w/	2% calcium and paper.
7/7/83Pressured t	tested plug. No plug. Flu		okr at 598'. Pumped 200 gals
			sure tested plug - No plug.
	00 sks cmt w/2% Calcium and		
7/8/83Pressure tested plug. No plug. Squeezed 100 sks cement w/2% Calcium. SI - no pressure WOC. Pressure tested - No plug. Tagged bottomhole plug at 1881'. Mixed 2 sks paper			
	ed 100 sks cement w/2% Cal		
w/no pressu			
7/11/83Pressure t	est plug. No plug. Spotte	d 100 sks cmt. Pulled	tbg. WOC. Tagged plug at
	320' w/4 shots/ft. Spott	ed 50 sks cmt at 341'.	Bullhead squeezed - SI
w/200 psi.			See attachment
18. I hereby certify that the	foregoing is true and correct		
SIGNED Emer	Milana TITLE_	Area Manager	DATE9/14/83
(This space for Federal)	or state onceruse, attro	, etc Alite etc.	DATE 16-2285
APPROVED BY CONDITIONS OF APPR	OVAL IF ANY:	a the sentence of the the	DATE OA O J
STRUGG VE MITA			

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*See Instructions on Reverse Side

Tract 12 Well No. 2 9-331 Attachment Page 2

7,12/83....Pressure tested plug. No plug. Spotted 50 sks cmt. SI w/400 psi. WOC. Pressure tested plug to 500 psi. Held. Tagged plug at 94'. Mixed 15 sks cement for top hole plug. Installed P&A Marker.

Location cleaned, seeded and ready for inspection