

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLE
COPIES TO AGENCIES
FOR REVIEW

FE
re

Form approved.
Budget Bureau No. 42 R1424
5. LEASE DESIGNATION AND SERIAL NO.

LC-054253

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 WELL ☒ GAS WELL ☐ OTHER ☐

RECEIVED

7. UNIT AGREEMENT NAME

West Loco Hills Grb #4 Sd Ut.

2. NAME OF OPERATOR

NEWMONT OIL COMPANY ✓

OCT 10 1978

8. FARM OR LEASE NAME

Tract 5 ✓

3. ADDRESS OF OPERATOR

P.O. Box 1305, Artesia, New Mexico 88210

9. WELL NO.

1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

O.G.C.
ARTESIA, OFFICE

10. FIELD AND POOL, OR WILDCAT

Loco Hills (O.G.SA)

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

Section 10, T-18S, R-29E

14. PERMIT NO.

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

3513' GLM

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT 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 ☐

ABANDON* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

(Other)

Check Water Flow

XX

(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.)*

10-1-78 -- A water leak has developed from the casing head. We are draining this water into a pit from which it will be hauled back to the injection plant. The present rate of back flow is 12 BWPD. We request permission to continue this operation until the water source is located. The District Engineer will be notified of our plans before the leak is repaired.

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

SIGNED

TITLE

Office Manager

DATE Oct 2, 1978

(This space for Federal or State office use)

APPROVED BY

TITLE

ACTING DISTRICT ENGINEER

DATE OCT - 6 1978

CONDITIONS OF APPROVAL, IF ANY: