

NO. 10-10-1000

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Copy to ST  
LC-056014

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		<b>RECEIVED</b>
2. NAME OF OPERATOR NEWMONT OIL COMPANY ✓		
3. ADDRESS OF OPERATOR P.O. Box 1305, Artesia, New Mexico 88210		OCT 4 1978
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  1650' FNL, 330' FWL of Section 10		O.G.S. ARTESIA, OFFICE
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)  3515 G.L.	

7. UNIT AGREEMENT NAME West Loco Hills Grb. 74 Sd Ut.	
8. FARM OR LEASE NAME Tract 8A	
9. WELL NO. 1	
10. FIELD AND POOL, OR WILDCAT LOCO HILLS (O.G.S.A)	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 10-18S-29E NMPM	
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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Temporary Abandonment	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
(Other) <input 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. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) \*

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

RECEIVED  
SEP 20 1978  
U.S. GEOLOGICAL SURVEY  
ARTESIA, N.M.

18. I hereby certify that the foregoing is true and correct.		
SIGNED <i>[Signature]</i>	TITLE Office Manager	DATE 9/29/78
(This space for Federal or State office use)		
APPROVED BY <i>[Signature]</i>	TITLE ACTING DISTRICT ENGINEER	DATE OCT - 3 1978
CONDITIONS OF APPROVAL, IF ANY:		

UNLESS FURTHER APPROVED, WELL MUST  
BE PUT TO BENEFICIAL USE OR PLUGGED BY  
APRIL OCTOBER 1. 001-1 - 1979

\*See Instructions on Reverse Side