

**NMOCC COPY**  
**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

SUBMIT IN TRIPLI  
(Other instructions on  
reverse side)

*copy to ST*  
Form approved.  
Budget Bureau No. 42 R1424.

**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 **WIW** **RECEIVED**

2. NAME OF OPERATOR  
**NEWMONT OIL COMPANY** **APR 28 1978**

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** **O.C.C. ARTESIA, OFFICE**

**990' FSL & 330 FEL of Section 10**

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
**3495' GLM**

5. LEASE DESIGNATION AND SERIAL NO.

**LC-062072**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

**West Loco Hills Grb #4 Sd U**

8. FARM OR LEASE NAME

**Tract 17**

9. WELL NO.

**6**

10. FIELD AND POOL, OR WILDCAT

**Loco Hills (C-11A)**

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

**Sec 10-T18S-R29E NMPM**

12. COUNTY OR PARISH 13. STATE

**Eddy**

**New Mexico**

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) **Maintain Pit**

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\* ☐

(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.)\*

**4-22-78 -- We wish to maintain the pit at this well in a fenced and dried up condition to use whenever needed.**

**RECEIVED**

**APR 26 1978**

**U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO**

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

SIGNED

*Ernest J. McLenighan*

TITLE **Office Manager**

DATE **4/25/78**

(This space for Federal or State office use)

APPROVED BY

*Joe S. Lara*

TITLE **ACTING DISTRICT ENGINEER**

DATE **APR 27 1978**

CONDITIONS OF APPROVAL, IF ANY: