N.M. D. C. C. COM Form 9-331 (May 1963) TED STATES L TED STATES SUBMIT IN THE (CAT OF THE INTERIOR Verse side) (CATE 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY LC -062072
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.) 7. UNIT AGREEMENT NAME GAS WELL WELL XX OTHER lest Loco Hills Grb.#4 Sd Ut. 8. FARM OR LEASE NAME NAME OF OPERATOR NEWMONT OIL COMPANY Tract 17 3. ADDRESS OF OPERATOR 9. WELL NO. P.O. Box 1305, Artesia, New Mexico 88210 LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) 10. FIELD AND POOL, OR WILDCAT At surface LOCO HILLS (Q.G.SA) 11. SEC., T., R., M., OR BLK. AND SURVEY OR ARDA 1650' FSL & 330' FEL of Section 10 10-18S-29E NMPM 14. PERMIT NO. 15. ELEVATIONS (Show whether DF. RT. GR. etc.) 12. COUNTY OR PARISH | 13. STATE 34991 GLM New Mexico 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSPOUDNT REPORT OF: TEST WATER SHUT-OFF PULL OR ALTER CASING REPAIRING WELL WATER SHUT-OFF MULTIPLE COMPLETE FRACTURE TREAT PRACTURE TREATMENT ALTERING CASING SHOOT OR ACIDIZE SHOOTING OR ACIDIZING Temporary Abandonment REPAIR WELL CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) 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 sones pertinent to this work.) * 518-73 We request an extension of approval for Temporary Abandonment for one year. This property is under study for tertiary recovery operations. RECEIVED OCT 2 2 1975 o. c. c. ARTESIA, OFFICE 18. I hereby certify that the foregoing is true and correct Office Manager TITLE

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