OV	11N ~ 50 (CTATEC	NIS COUNTY OF THE TOTAL	- manned	Yorm approv	ed. 6 51
RECEIPTION BY	UN TED S DEPARTMENT OF	THE INTER	10Raymer PR	A PROPER	N BURRE BURRETION	AND BERIAL NO.
MAR 201985	GEOLOGICA			38210	LC-060904	
CLIMIT	DV NOTICES AND	PEPORTS	ON WELLS	IVED	G. IF INDIAN, ALLOTTE	E OR TRIBE NAME
O. C. D. SUINL	on for proposals to drill or the "APPLICATION FOR PE	to deepen or plug	back to a different reservants	voir.	3	
	"APPLICATION FOR PE	EKMII— 107 BUCH I	Oct 11 17	51 AH '	7. UNIT AGREEMENT NA	AME
OIL GAB WELL	OTHER . V	JIW - TA	oup aft	AND HGMT	West Loco Hill	ls Grb <u>#4_S</u> D
2. NAME OF OPERATOR YATES AFTRO LEWIN CORP. ROSWELL DISTRIC					8. PARM OR LEASE NAME UT	
NEWMONT OIL COMPANY					Tract 13	
3. ADDRESS OF OPERATOR 88210					5	
P. O. Box 1305 Artesia N.M. 00210 4. 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	
1650' FNL & 1670' FEL of Sec. 12, T18S, R29E NMPM					SURVEY OR AREA	
1000 THE CITY THE OF SEC. 12, 1100, RESE WHITE					Sec. 12, T18S, R29E NMPM	
14. PERMIT NO.	15. ELEVATION	NS (Show whether DI	r, RT, GR, etc.)		12. COUNTY OR PARISH	13. STATE
		3526' Gr.			Eddy	
16.	Check Appropriate Bo	ox To Indicate N	Nature of Notice, Re	port, or Ot	her Data	
NO	TICE OF INTENTION TO:			SUBSEQUE	NT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER	CASING	WATER SHUT-OF	· [_]	REPAIRING W	VELL
FRACTURE TREAT	MULTIPLE COMP	J.ETE	FRACTURE TREAT		ALTERING CA	
SHOOT OR ACIDIZE	ABANDON*		BHOOTING OR AC		ABANDONMEN	'T*
REPAIR WELL	CHANGE PLANS		(Other)	P&A port results of	f multiple completion	on Well
(Other) 17. DESCRIBE PROPOSED OR Coproposed work. If we nent to this work.) •	COMPLETED OPERATIONS (Clear, well is directionally drilled, g	ly state all pertinen ive subsurface loca-	t details and rive pert	inent dates, li	ion Report and Log for neluding estimated date depths for all markers	e of starting any
7/25/83Tagged	bottom and pulled	up l jt. Sp	otted 100 sks o	ement w/	2% Calcium.	
7/06/00 -	1 00071 -				_ ~	
7/26/83Tagged	plug at 230/'. Pr ker to 819' and se		-			
_	975'. Mixed 15 s	-			-	
7/07/00 -						
7/27/83Pressure	ed to 500 psi. He % Calcium. WOC.					
	% Calcium. Instal			igged più	g at 21) . Hi	.xed IJ 8x8
Location	n cleaned, seeded	and ready for	or inspection.			
						÷
				•		
•						
					;	
			, % ***			
						•
					, #1 ₈	
18 I hapahw saweifer that th	e for going is true and come	A+				
	1 411411	•	a Manager		D.1.000 0./1./	. /02
SIGNED	a the outil	TITLE ACE	a rianager		DATE 9/14	./83
(This space for Federal	or State office use)	ý.		·	9 10	
APPROVED BYCONDITIONS OF APPR	ROVAL IF ANY:	TITLE			DATE 279	0.7
COMPLIANTS OF BEEL						