

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRI.
(Other instruction
verse side) ATE
n reForm approved.
Budget Bureau No. 42-K1424.
5. LEASE DESIGNATION AND SERIAL NO.

LC-060904

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 ☐

2. NAME OF OPERATOR

NEWMONT OIL COMPANY

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

990' FNL & 990 FEL Section 12

JAN 12 1973

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3527' GL ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

W. LOCO HILLS G. #4 S Ut

8. FARM OR LEASE NAME

Tract 13

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Loco Hills

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

12-18S-29E

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

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) ☐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.) *

This well was fracture treated w/20,000 gals oil and 40,000# sand as follows:

11/24/72: Pumped 1000 gals 15% HCL w/inhibitor and iron sequestering agent, frac'd w/20,000 gals oil and 40,000# sand, plus 1400# rock salt. Max. pressure 2350# psi. Avg. pressure 2200# psi. ISDP 2200# psi.

11/26/72: Ran tubing and packer, dropped hydraulic pump, put well to pumping

Produced 1 BOPD and 170 BWPD before treatment

Produced 60 BOPD and 374 BWPD after treatment

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

SIGNED

Charles C. Joy

TITLE

Dist. Supt

DATE

1/8/73

(This space for Federal or State office use)

APPROVED BY
CONTROLLER OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

