						1	6/58	
Form 9-331 (May 1963)		U TED STA 4ENT OF TH		SI BMIT	n Alsey	Form approv Budget Burer 5. LEASE DENIGNATION	u No. 42-R1424	
		EOLOGICAL S			<b>\$\$</b> 210	LC 056014		
SUN		CES AND R	EPORTS (	ON WELLS		6. IF INDIAN, ALLOTTE	OR TRIBE NAME	
	form for propos		even or plug	back to a different re	servoir.			
1.			RECE	IVED	7. UNIT AGREEMENT NAME			
$\begin{array}{c c} \text{OIL} & \text{GAS} \\ \text{WELL} & \text{WELL} & \text{OTHER} & \text{WIW} - \text{XXX} & \text{TA} \\ \hline 2 & \text{NAME OF OPERATOR} & \hline \end{array}$							WEST LOCO HILLS GRB #4 SD UT 8. FARM OR LEABE NAME	
NEWMONT OIL COMPANY				AUG 4	1982	TRACT	8B	
3. ADDRESS OF OPERATOR		1055051		O. C.		9. WELL NO.	4	
1. LOCATION OF WELL (H	( 1305 eport location cl	ARTESIA, N early and in accord	NEW MEXIC ance with any	State requirements.	OFFICE	IN FIELD AND POOL, OF		
S <del>ce</del> also space 17 belo At surface	JW.)					LOCO HILLS (Q.		
330' FNL 990' FWL Sec. 15-18-29						11. SEC., T., R., M., OR F SUEVEY OR AREA		
	<u> </u>				Sec. 15-18-			
14. PERMIT NO.		15. ELEVATIONS (S	how whether DF 6478'	, RT, GR, etc.)		12. COUNTY OR PARISH Eddy	New Mexico	
16.	Charle Ar	· · · · · · · · · · · · · · · · · · ·	<u> </u>	lature of Notice	Parat or (	Other Data	I	
Clieck Applophole box to indicate trainle of traince, hepoily of						UENT REPORT OF:		
TEST WATER SHUT-01	пр р	ULL OR ALTER CASIN	10	WATER SHUT-	OFF	REPAIRING V	TILL	
FRACTURE TREAT		ULTIPLE COMPLETE		FRACTURE TRI		ALTERING CA		
SHOOT OR ACIDIZE Repair Well		BANDON <sup>‡</sup> Hang <b>e plans</b>	XX	SHOOTING OR (Other)	ACIDIZING		/T*	
(Other)			Complet	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) details, and give pertinent dates, including estimated date of starting any				
17. DESCRIBE PROPOSED OF proposed work. If nent to this work.)	well is direction	ATIONS (Clearly standard) drilled, give s	te all pertinen ubsurface locat	t details, and give p tions and measured a	ertinent dates nd true vertic	, including estimated date cal depths for all markers	e of starting any and zones perti-	
<ol> <li>Perforate l plug in cas</li> <li>Perforate a plug in cas</li> </ol>	pase of sa sing. top of sal sing. 2 cement p	lt @ <u>840</u> t @ <u></u> lug at surfo	and s	l squeeze wit queeze with	h 50 sac 50 sacks	h 25 sack cemen ks cement leavi cement leaving ion casing toge	ng 100' 100'	
Note: (A.)	Vour of	king will he	, notikio	d 24 hrs.pr	ior to o	perations.		
(B.)	All plu	gs will be i	verified					
(C.) (D.)		ll be loadec ot plan to p		all plugs w casing.	ith 10#	mud		
(0.)		ore preservice p						
							:	
					ين ۽ پر انداز آهن آهن			
						n galantaria. Kato a gala		
18. I hereby certify that	the foregoing is	true and correct		·		7/0	3/82	
SIGNED Zand	X-1 ML	Jonogil /	TITLE	Area Manage	r	// 2 DATE	5/82	
(This space for Feder	af or state par	OVED	ĺ					
APPROVED BY CONDITIONS OF AP	. Sgd.) PETE	R W. CHESTER	TITLE	· · · · · · · · · · · · · · · · · · ·		DATE		
CONDITIONS OF AP	AUG							
	FOR							
	JAMES A	. GILLHAM <sup>*See</sup> UPERVISOR	Instructions	on Reverse Side				