

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☐ other ☒ WIW - TA

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. See space 17 below.)

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☐

5. LEASE

LC 056014

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

West Loco Hills GRB # 4 SD

8. FARM OR LEASE NAME

Tract 8D

9. WELL NO.

5

10. FIELD OR WILDCAT NAME

Loco Hills (O.G.SA)

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

15-18S-29E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3460' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

3-10-83 Set 5½" CIBP @ 2475'. 25 sacks of cement @ 2475'. Perforate 5½" casing @ 950'. Squeeze 50 sacks of cement @ 950'.

3-11-83 Tag @ 826'. Perforate @ 355'. Squeeze 55 sacks of cement @ 355'.

3-12-83 Tag @ 225'. Squeeze 60 sacks of cement @ 8 5/8" casing.

3-14-83 Squeeze 40 sacks @ 8 5/8" casing.

3-15-83 15 sacks of cement surface plug and marker.

RECEIVED

DEC 31 '90

O. C. D.

ARTESIA, OFFICE

Subsurface Safety Valve: Manu. and Type

Set @

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

SIGNED

TITLE

Area Manager

DATE

7/20/83

(This space for Federal or State office use)

APPROVED BY

TITLE

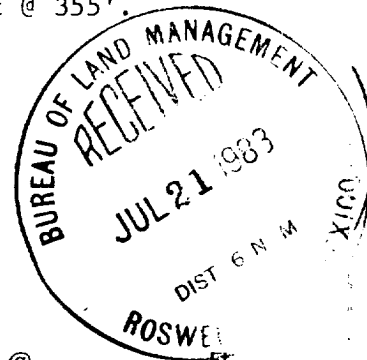
DATE

12/20/90

CONDITIONS OF APPROVAL, IF ANY:

Approved as to plugging of the well bore.
Liability under bond is retained until
surface restoration is completed.

*See Instructions on Reverse Side



Post ID-2
11-11-83
P4A