

NATIONAL COPIES
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT TO THE FIELD OFFICE
(Other field offices on the reverse side)Form approved.
Budget Bureau No. 42 R1424
LEASE DESIGNATION AND SERIAL NO.

NM-021095

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. RECEIVED

7. UNIT AGREEMENT NAME

Loco Hills Flood

8. FARM OR LEASE NAME

Yates "A"

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Loco Hills (Q. G. SA)

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

Sec. 6-T18S-R30E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

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 surfaceO. C. C.
ARTESIA, OFFICE

330' FNL, 990' FEL Sec. 6, T18S, R30E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3548' GLM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Temporarily abandon

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)

9-1-78---We have temporarily abandoned this well due to economics. We wish to hold for possible tertiary recovery operations now under study.

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

SIGNED

TITLE Office Manager

DATE

9/14/78

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE

SEP 18 1978

CONDITIONS OF APPROVAL, IF ANY:

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL OCTOBER 1. O&L-1 - 1979

*See Instructions on Reverse Side