| | | N.M. | 0, c, c, _{Co} , - | Capy to Ac |
|--|----------------------------------|----------------------|---|--|
| ILED STATES SUBMIT | | | SUBMIT IN 'L LICAT | |
| | RY NOTICES AND I | | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| I. OIL GAS WELL XX WELL OTHER | | | | 7. UNIT AGREEMENT NAME |
| 2. NAME OF OPERATOR | | | | West Loco Hills Grb.#4 Sd 8. FARM OR LEASE NAME |
| NEWMONT OIL COMPANY 3. ADDRESS OF OPERATOR | | | | Tract 1 9. WELL NO. |
| P.O. Box 1305, Artesia, New Mexico 88210 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* | | | | 2 |
| At surface 17 below.) | | | | LOCO HILLS (Q.G.SA) |
| V = 1 N = 222 | 1 50 4 50 | | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA |
| 1650' FSL ε 330' FWL of Section 7 | | | | 7-18s-30E NMPM |
| 14. PERMIT NO. | 15. ELEVATIONS | (Show whether in GLM | of, RT, GR, etc.) | 12. COUNTY OR PARISH 13. STATE Eddy New Mexico |
| 16. | | | Nature of Notice, Report, o | · · · · · · · · · · · · · · · · · · · |
| | | | | EQUENT REPORT OF: |
| TEST WATER SHUT-OFF | PULL OR ALTER CAN | 9110 | WATER SHUT-OFF | RDPAIRING WELL |
| FRACTURE TREAT SHOOT OR ACIDIZE | MULTIPLE COMPLET | TE | FRACTURE TREATMENT SHOOTING OR ACIDIZING | ALTERING CASING ABANDONMENT® |
| REPAIR WELL | CHANGE PLANS | | (Other) Temporar | y Abandonment XX |
| (Other) | | | Completion or Reco | ilts of multiple completion on Well mpletion Report and Log form.) tes, including estimated date of starting any |
| • | | | Temporary Abandonmen y recovery operation | |
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| | | | RECEIVED | RECEIVE. SECTIONS U.S. GEOLOGICA |
| | • | | OCT 2 2 1975 | U. S. C. 1. 1. 1975 |
| | | | O. C. C. | U.S. GEOLOGICAL SURVEY ARTESIA, KEW MEXICO |
| 18 I hereby certify that th | ne foregoing is true and correct | t | | · · · · · · · · · · · · · · · · · · · |
| SIGNED THE T | f Milfore gell | / | Office Manager | DATE 9-11-75 |
| (This apage for Federa | of State office use) | | | |
| APPROVED BY | | TITLE | WELL MUST | DATE |
| CONDITIONS OF SEP | UNLESS FURTH | HER APPROVE | OR PLUGGED BY | |
| BEEKING P | BE PUT OC DE | 上 → alak |) ns on Reverse Side | |

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*See Instructions on Reverse Side