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RECEIVED
NEW MEXICO OIL CONSERVATION COMMISSION
APR - 4 1979

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

O. C. C.
ARTESIA, OFFICE

5a. Indicate Type of Lease State <input type="checkbox"/> Federal <input type="checkbox"/>
5. State Oil & Gas Lease No. NM-025614

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- WIW	7. Unit Agreement Name W. Loco Hills G4S Ut
2. Name of Operator Newmont Oil Company	8. Farm or Lease Name Tract 21B
3. Address of Operator P. O. Box 1305 - Artesia, New Mexico 88210	9. Well No. 5
4. Location of Well UNIT LETTER F , 1980 FEET FROM THE FNL LINE AND 1980 FEET FROM THE FWL LINE, SECTION 18 TOWNSHIP 18 RANGE 30 NMPM.	10. Field and Pool, or Wildcat Loco Hills (Q-G-SA)
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Eddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER <input type="checkbox"/>
REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING CPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER Bradenhead to surface <input checked="" type="checkbox"/>	
ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

One string of casing - no bradenhead

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED *Ernest J. McLanigan* TITLE Office Manager DATE 3/30/79

APPROVED BY *B. W. Weaver* TITLE DEPUTY DIRECTOR DATE MAY 18 1979

CONDITIONS OF APPROVAL, IF ANY: