		NH OIL CONS. COMMIS	SION
RECEIVED BY	NITED STATE	Drawer DD SArtesia (Mheronauru INTERIOR vere alde)	IPLICATE Form approved. Budget Bureau No. 42-R14 5. LEAKE DENIGNATION AND BERIAL NO.
	GEOLOGICAL SUF		LC-048468
OCT 8-1985			G. IF INDIAN, ALLOTTEE OR TRIBE NAS
SUNDRY	NOTICES AND REP	OKID OIN WELLD n or plug back to a different reser	rvoir.
ARTESIA, OFFICE	APPLICATION FOR PERMIT_"	n or plug back to a different reser ' for such proposals.)	7. UNIT AGREEMENT NAME
OIL GAS		WIW - TA PLA	W.L.H.U. GRB #4 SD UT
WE'L WELL OF OPERATOR	DTHER U		8. FARM OR LEASE NAME
NEWMONT -	H COMPANY Yold	V.J. Com	TRACT 2B
3. ADDRESS OF OFERATOR	1205 ADTEOTA		9. WILL NO.
P. U. BUX	(1305ARTESIA, Notestion clearly and in accordance	VEW MEXICO 88210 e with any State requirements.•	10. FIELD AND POOL, OR WILDCAT
4. Incation of well (Report in See also space 17 below.) At surface	feation clearly and in accordance		Loco Hills (Q.G.SA)
			11. SEC., T., R., M., OE BLE. AND SURVEY OR AREA
330' FNI.	, 2310' FEL Sec. 18-	-18-30	Sec. 18-18-30
		whether DF, RT, GR, etc.)	12. COUNTY OF PARISH 13. STATE
14. PERMIT NO.	15. ELEVATIONS (Show	whether br, ki, uk, cally	EDDY NEW MEXT
		ndicate Nature of Notice, R	BUBSEQUENT REPORT OF:
NOTICE	OF INTENTION TO: '		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OF	
FRACTURE TREAT	ABANDON*	BHOOTING OR AC	
SHOOT OR ACIDIZE	CHANGE PLANS	(Other)	
(Other)	ب	Completio	eport results of multiple completion on Well n or Recompletion Report and Log form.) tinent dates, including estimated date of starting it true vertical depths for all markers and zones pe
	s plugged and abando 35 sacks cement at		
1/5/83Tagged p Mudded i	ip and perf base of	ted csg to 500 psr. salt at 1125' and sq	Hole in csg between 280' and 5 queezed w/50 sacks cement. WOC
1/6/83Tagged y cement c	olug at 980'. Mudde it 200#. WOC.	ed up, perf top of so	ult at 395', squeezed 75 sacks
1/7/83Tagged p	olug at 289'. Set	15 sacks cement plug	and dry hole marker at surface
Location	n ready for inspect	ion	
			LL RAR 8 1323 LL
	-		OBLIGIOAS
18. I hereby certify that the for SIGNED Frances	FOMILI CUIT	ITLEArea Manager	DATE 3/8/83
(This space for Federal or	State office use		DATE F-3055 Post ID- 4-1-83
APPROVED BY CONDITIONS OF APPROV		ITLE	
CONDITIONS OF ALLOW	, •		Fost ID-
			4-1-83
	*See l	nstructions on Reverse Side	P+ A