

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TR CATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 050429 B

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. OIL WELL ☐ GAS WELL ☐ OTHER ☒ WIW

2. NAME OF OPERATOR

NEWMONT OIL COMPANY

3. ADDRESS OF OPERATOR

P. O. BOX 1305, ARTESIA, NEW MEXICO

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

990' FSL & 2310' FWL of Sec. 12; T-18S; R-29E

7. UNIT AGREEMENT NAME

W. LOCO HILLS G. 4S. Ut.

8. FARM OR LEASE NAME

TRACT 4

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

LOCO HILLS

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

Sec. 12-18S-29E - NMPM

14. PERMIT NO.

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

12. COUNTY OR PARISH

13. STATE

Eddy

New Mexico

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)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☒

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

8-9-68 Rig up and pump 500 gals 15% reg. acid into formation and shut well in

8-10-68 Return well to injection

RECEIVED
OCT 15 1968
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

G. E. C.
ARTESIA, OFFICE

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

SIGNED

Thomas J. Ledbetter

TITLE

Division Superintendent

DATE

9/18/68

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
OCT 15 1968
R. L. BLUMHART
ACTING DISTRICT SUPERVISOR

*See Instructions on Reverse Side