		ர <b>்சே</b> கோக ்கூத		Carry to S	5/
Form 9-331 (May 1963) DEPAF	UNI D STATE RTMENT OF THE GEOLOGICAL SU	INTERIOR	SUBMIT IN TRIPL (Other instructions reverse side)	Form approved.	1424.
SUNDRY NO	OTICES AND REP	PORTS ON	WELLS o a different reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE N	TAME
OIL CAS GAS OTHE	R	<del></del>	ECTIVED	7. UNIT AGREEMENT NAME West Loco Hills Grb. 8. FARM OR LEASE NAME	#4 Sd
2. NAME OF OPERATOR  NEWMONT OIL COMPANY  3. ADDRESS OF OPERATOR			DEC 4 1974	Tract 13	
P.O. Box 1305, Artesi 4. Location of Well (Report location See also space 17 below.)	a, New Mexico 8 on clearly and in accordan	8210 ce with any State		10. FIELD AND POOL, OR WILDCAT	<del></del> ·
2310' FSL & 990' FWL	of Section 12		Art Till the second	LOCO HILLS  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	<u> </u>
14. PERMIT NO.	15. ELEVATIONS (Sho	w whether DF, RT, (	OR, etc.)	12-18S-29E NMPM 12. COUNTY OR PARISH 13. STATE	2 .
	3500		(N. D.	Eddy New Me	<u>xic</u> o
16. Check Appropriate Box To Indicate Nature of Notice, Report, or C NOTICE OF INTENTION TO:  8UBSEQ				Other Data QUENT REPORT OF:	
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) Temporarily 17. DESCRIBE PROPOSED OR COMPLETE		XX xx all pertinent det	Completion or Recom	REPAIRING WELL  ALTERING CASING  ABANDONMENT*  ts of multiple completion on Well pletion Report and Log form.)  pletion Report and Log form of starting the completion depths for all markers and zones	ng any
proposed work. If well is di- nent to this work.)*	rectionally drilled, give sur	surface locations	and measured and true vert	ical depths for all markers and zones	peru-
This well was shut in	1 <u>July 1973</u> due	to econom	ic limit. We int	end to temporarily	
abandon this well and	d hold for possi	ble tertia	ry recovery, unde	r study during the	
next two years.					-
			•		er F
			∵ <del>,</del>	RECEIVED	•
				OCT 291974	
				IL S. GEOLÓGICAL SURVEY ARTESIA, NEW MEXICO	<i>.</i> -
18. I hereby certify that the foregon	o (	ritle Super	intendent	DATE 10-28-7	4
(This space for Federal or State	1	ritle		DATE	
A PORPLECE OF APPROVAL.		APPROVED	WELL MUSS		

ACTING DISTRICT ENGINEER

FURTHER APPROVED, WELL MUST PLUGGED BY PLUGGED BY APRIL O See Instructions of Reverse Side

Ut