

Form approved.  
Budget Bureau No. 42-R1424.

## 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 ☐ GAS ☐ WIW  
WELL WELL OTHER

2. NAME OF OPERATOR  
NEWMONT OIL COMPANY ✓

3. ADDRESS OF OPERATOR  
P. O. BOX 1305, ARTESIA, NEW MEXICO 88210

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

660' FSL & 1980' FWL Sec.11;T-18S;R-29E

7. UNIT AGREEMENT NAME	
W LOCO HILLS G 4S UT	
8. FARM OR LEASE NAME	
TRACT 11	
9. WELL NO.	
10	
10. FIELD AND POOL, OR WILDCAT	
LOCO HILLS	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
Sec. 11-18S-29E N4PM	
12. COUNTY OR PARISH	13. STATE
EDDY	NEW MEXICO

14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR. etc.)
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16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE	
REPAIR WELL	
(Other)	Run Liner

PULL OR ALTER CASING  
MULTIPLE COMPLETE  
ABANDON\*  
CHANGE PLANS

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.) \*

We propose to set `liner` as follows:

1. Clean out well and set 2 1/2" Seal-lock from 2472'-2689' with 50 sacks Class C cement.
2. Clean out well, log and perforate with 2" cased gun from 2631' to 2658'.
3. Frac well with 1000 gallons 15% regular acid, 10,000 gallons fresh water and 10,000# 20/40 sand.
4. Clean out and return well to injection.

RECEIVED

50 5120

**O. C. C.**  
**1913-14, OFFICE**

1. 1944

FEB - 3 1970

U. S. GEOLOGICAL SURVEY  
ARTESIAN NEW MEXICO

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

SIGNED

**TITLE** Division Superintendent

DATE 2-2-70

(This space for Federal or State office use)

APPROVED BY

**TITLE**

DATE \_\_\_\_\_

CONDITIONS OF ~~APPROVAL~~, IF ANY:

CONDITIONS OF APPROVAL

**APPROVED**

FEB 4 - 1979

B. L. BEEKMAN

ACTING DISTRICT ATTORNEY

**\*See Instructions on Reverse Side**