URITED STATES

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUNDRY	NOTICES	AND	REPORTS	ON	AVELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331–C for such proposals.)

WIW - TA

1.	oil	17	gas	\Box		
	well	1_1	well	1	ot.	he
					-	
2	14 C. LA	E OF	ODEDA:	TOD		

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. See space 17

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE

CHANGE ZONES

ABANDON*

(other)

SUBSEQUENT REPORT OF:

5. LEASE

1 LC 058481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

West Loco Hills GRB # REPIVED 8. FARM OR LEASE NAME

Tract 11

9. WELL NO. 10 APR 06 1983

dsF

O. C. D. 10. FIELD OR WILDCAT NAME

Loco Hills (Q. G. SA)ESIA, OFFICE

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

11-T18S-R29E NMPM

12. COUNTY OR PARISH 13. STATE Eddy New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) 3514° GL

(NOTE: Report results of multiple change on Form 9-330.)

MAR 3 0 1983

__ Set @ ___

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.)*

- 1-26-83 25 sacks of cement @ 2511'. 1.)
- 1-27-83 Tag plug @ 2255'. Perforate @ 950'. Set retainer @ 900'. 2.)
- 3.) 1-28-83 Squeeze 50 sacks below retainer. Shut in 300 PSI.
- 1-28-83 Pump 15 sacks on top of retainer. 4.)
- 5.) 1-29-83 Tag @ 709'. Perforate @ 498'.
- 6.) 1-29-83 Set packer @ 385'. Squeeze 36 sacks of cement.
- Set packer @ 285'. Squeeze 106 sacks of cement. 7.) 1-29-83
- 8.) 1-31-83 Tag plug @ 287'.
- 9.) 1-31-83 15 sack surface plug.

Location ready for inspection

2	I hereby o	artify that	the fores	anina is tr	ue and cal	Fract

Subsurface Safety Valve: Manu. and Type _____

energhane Area Manager DATE 3/28/83

(This space for Federal or State office use)

_____ DATE ___

CONDITIONS OF APPROVAL, IF ANY: