		
NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE /	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE /		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State XX Fee.
OPERATOR -	·	5. State Oil & Gas Lease No.
		B-6631-24
SLID	IDDY NOTICES AND DEPORTS ON WELLS	
(DO NOT USE THIS FORM TO	IDRY NOTICES AND REPORTS ON WELLS PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
1.	GATION TO TEMBLE = (LOUND G-101) FOR SOUR PROPOSACS!)	7. Unit Agreement Name
OIL X GAS WELL	OTHER•	W. Loco Hills G 4S Ut
2. Name of Operator	VIDEN	8. Farm or Lease Name
Newmont Oil Compa	nv /	Tract 37
3. Address of Operator		9. Well No.
P.O. Box 1305, Ar	tesia New Mexico	3
4. Location of Well	toolog non hexteo	10. Field and Pool, or Wildcat
- 	1190 North 100	lass Wills
UNIT LETTER,_	1190 FEET FROM THE North LINE AND 150 FEET FR	Loco Hills
Enn+	11 10 0 00 5	
THE EdSL LINE, SE	CCTION 11 TOWNSHIP 18-S RANGE 29-E NMP	M. (

	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3599	Eddy ()))
16. Chec	ck Appropriate Box To Indicate Nature of Notice, Report or C	Other Data
	· · · · · · · · · · · · · · · · · · ·	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	FEGG AND ABANDONIVIENT
	OTHER Acidize	
OTHER		
,		
17. Describe Proposed or Complete work) SEE RULE 1603.	d Operations (Clearly state all pertinent details, and give pertinent dates, includi	ng estimated date of starting any proposed
WOIN) SEE ROLE 1103.		
	2685-2703	
7-7-67 Pum	p 500 gallons 20% acid down to perforations and l	et set 10 minutes.
• • • •	garage garage and about down to politications and i	or our in miliacost
Production improved from ! BO and 43 BW to 2 BO and 76 BW.		
Troduction improved from : Do and 45 BW to 2 Bo and 70 BW.		
	19	
	E-9	ECEIVED
		AUG 1 5 1967
		MOG 1 7 196/
		C. C. C. RTEBIA, OFFICE
18. I hereby certify that the informa	tion above is true and complete to the best of my knowledge and belief.	
ORIGINAL SIGNED SI		
H. J. LEDBETTER	Division Superintendent	August 11 1067
SIGNED	TITLE DIVISION Superincement	_{DATE} August 11, 1967

TITLE 012 483 300 (45988 204

11567

APPROVED BY U. A. Sussett