

N. M. O. G. C. COPY.
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIU
(Other instruction
verse side)

Copy to SF

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 WELL ☒ GAS 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
990' FSL & 1310' FEL Section 3, T18S, R29E.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3512.5 RKB

5. LEASE DESIGNATION AND SERIAL NO.
Fed, LC-058125

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
West Loco Hills Grb. #4 S. U

8. FARM OR LEASE NAME
Tract 9

9. WELL NO.
3

10. FIELD AND POOL, OR WILDCAT
Loco Hills O. Grb. S. A.

11. SEC. T. R. M., OR BLK. AND
SURVEY OR AREA
Sec 3-T18S-R29E

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input checked="" type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

(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.)

5/22/73--Pumped 2 drums gyp control chemical in 20 bbls of produced water followed with emulsified oil frac down casing as follows. Pumped 1500 gals pad, pumped 2500 gals w/ 2# per gal 20/40 sand, pumped 5000 gals w/ 3# per gal 20/40 sand, pumped 5000 gals w/ 4# per gal 20/40 sand. Flushed with lease crude. 2000 psi ISDP. Max press 2800 psi, averaged 22 BPM rate on treatment.

6/16/73-- All load oil recovered.

6/26/73--Well Test average for 10 days, 10 barrels oil and 90 barrels water.

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JUN 27 1973
U.S. GEOLOGICAL SURVEY
EDDY, NEW MEXICO

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

SIGNED Charles C Joy TITLE Supt.

(This space for Federal or State office use)

DATE 6/27/73

APPROVAL
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

APPROVED
JUN 27 1973
R. L. BECKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

Form 9-331
(May 1963)UNITED STATES
DEPARTMENT OF THE INTERIOR
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1. OIL WELL ☒ GAS 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

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NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐FULL 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 perti-
nent to this work.)*

5/8/73--Spotted 100 gals of 15% acid on formation and let set 20 minutes. Pressured up and formation broke @ 2200 psi. Picked up tubing to 2590' GLM, pumped 700 gals acid, followed with 500 gals acid containing 42 7/8" ball sealers, followed by 200 gals acid. Displaced with water and shut in 20 minutes. Pumping rate on acid 3 bbls/minute, no ball action.

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Charles C Joy

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R. L. BEEKMAN
ACTING DISTRICT ENGINEER

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ARTESIA, NEW MEXICO

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SUNDRY NOTICES AND REPORTS ON WELLS

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1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		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 990' FSL & 1310' FEL Section 3, T18S, R29E.		5. ELEVATIONS (Show whether DF, RT, OR, etc.) 3512.5 RKB		6. PERMIT NO.		7. UNIT AGREEMENT NAME West Loco Hills Grb. #4 S. U.		8. FARM OR LEASE NAME Tract 9		9. WELL NO. 3		10. FIELD AND POOL, OR WILDCAT Loco Hills O. Grb. S. A.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 3-T18S-R29E		12. COUNTY OR PARISH Eddy		13. STATE New Mexico	
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NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Production Casing <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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4/23/73--Drilled 7 7/8" hole to 2675'. Ran logs. Ran 2664' 4 1/2" 9.5# casing with insert float shoe in first joint. Cemented with 390 sacks of light cement containing 6% gel and 2% CaCl₂, slurry wt. 12.6#/gal, followed with 100 sacks of Class "H" containing 3/4% friction reducer, 5# salt and 10# of #3 sand per sack, slurry wt. 16.2#/gal. Shut in for 24 hrs. Top of cement by Kuster bomb 850' GLM.

4/25/73--PBDT 2646' (insert float valve) Perforated 2shots per foot 2620' to 2634'.

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APPROVED BY R. L. BECKMAN TITLE ACTING DISTRICT ENGINEER

DATE 6/27/73

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REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) Surface Casing ☐

REPAIRING WELL ☐

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4-19-73--Drilled 10 3/4" hole to 397'. Ran 380' of 8 5/8" 24# J-55 R-3 casing. Cemented @ 392' w/ 100 sacks Class "H" cement plus 2% CaCl₂. Displaced plug to 346' WLM. Cement in place @ 7:30 PM.

4-20-73--WOC and nipple up. After 18 hrs pressured up on casing to 1000# for 30 minutes, Casing held. Resumed drilling. Top of cement by Kuster bomb 150' GLM.

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