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Form 9-331  
(May 1963)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(Other instructions on re-  
verse side)

Form approved

U. S. LEASE INFORMATION AND SURVEY NO.

LC-060905 (b)

U. S. LEASE, ALLOWED OR OTHER NAME

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT ABBREVIATION NAME	
2. NAME OF OPERATOR NEWMONT OIL COMPANY		West Loco Hills Grb. #4 Sd Ut.	
3. ADDRESS OF OPERATOR P.O. Box 1305, Artesia, New Mexico 88210		8. FARM OR LEASE NAME Tract 15	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  990' FNL & 1650' FWL of Section 1		9. WELL NO. 3	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT LOCO HILLS (Q.G.SA)	
15. ELEVATIONS (Show whether SP, HP, OR, etc.) 3557' GLM		11. SEC., T., R., E., OR NEQ. AND CORNER OR AREA 1-18S-29E NMPM	
		12. COUNTY OR PARISH Eddy	13. STATE New Mexico

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

NOTICE OF INTEREST TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETS <input type="checkbox"/>	FRACURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDISE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	BROOKING OR ACIDISING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Temporary Abandonment</u>	
(Other) <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.)  
S1 6-73

We request an extension of approval for Temporary Abandonment for one year.  
This property is under study for tertiary recovery operations.

RECEIVED  
SEP 11 1975  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

18. I hereby certify that the foregoing is true and correct.  
SIGNED [Signature] TITLE Office Manager DATE 9-11-75  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: