Form 9-331 (May 1963)

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

"NITED STATES

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBMIT IN TO PLICATES (Other instrance 16 on re-

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

COPY TO O C. C., Form approved. Budget Bureau No. 42-R1424.

ALTERING CASING

ABANDONMENT*

DEPARI ENTOF THE INTERIOR verse side)	5. LEASE DESIGNATION AND SERIAL NO.		
GEOLOGICAL SURVEY	LC 064175-A		
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.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
OIL XX GAS OTHER	7. UNIT AGREEMENT NAME YOUNG UNIT		
. NAME OF OPERATOR	8. FARM OR LEASE NAME		
NEWMONT OIL COMPANY			
. ADDRESS OF OPERATOR	9. WELL NO.		
P. O. BOX 1305, ARTESIA, NEW MEXICO 88210	26		
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT YOUNG QUEEN		
330' FSL & 990' FEL of Sec. 20; T-18S, R-32E	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20-185-32E NMPM		
4. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, OR, etc.)	12. COUNTY OR PARISH 13. STATE		
	Lea New Mexic		
6. Check Appropriate Box To Indicate Nature of Notice, Report, or	r Other Data		
NOTICE OF INTENTION TO:	EQUENT REPORT OF:		
TEST WATER SHIPTORY DELL OF ALTER CASING			

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) Perforate 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 plan to perforate this well with 3 1/8" select fire burless, 2 shots 3788 - 3806', 3812 - 19, 3824 - 27, 3832 - 38'.

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18. I hereby certify that the foregoing is true and correct SIGNED SIGNED SIGNED	TITLE	Division Superintendent	DATE _	10/12/70
(This space for Federal or State office use)				
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	ASSINED FOR S		10 10 10 10 10 10 10 10 10 10 10 10 10 1
		00T 1 6 1970		# ####################################
*Se	e Instruction	ons on Reverse Side GEOLOGIUME U	NULLYEY	,
		HOBBS, NEW MEX		

RECEIVED

007.2 1970

OIL CONSERVATION COMM.