	, l'accer to	var -	
Form 9-331 (May 1963)	UN_D STATES	OTASEBMIT IN TRIP	
GEOLOGICAL SURVEY Artosle			LC 063441
	TICES AND REPORTS (losals to drill or to deepen or plug CATION FOR PERMIT—" for such p		6. IF INDIAN, ALLOTTEE OR TEIBE NAME
			7. UNIT AGREEMENT NAME
$\begin{array}{c c} \text{OIL} & \text{GAS} \\ \text{WEVL} & \text{WELL} & \text{OTHER} & \text{WIW} - \text{TA} \end{array}$			YOUNG UNIT
2. NAME OF OPERATOR			8. FARM OR LEASE NAME
NEWMONT OIL COMPANY 3. address of operator			9. WELL NO.
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.)			25 10. FIELD AND FOOL, OR WILDCAT
At surface 990' FSL & 1650' FEL Sec. 20-T18S-R32E			Young Queen 11. SEC., T., R., M., OR BLK. AND SUBVEY OR ABEA Sec. 20-T18S-R32E NMPM
14. PERMIT NO.	15. ELEVATIONS (Show whether DE	, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	<u> </u>		EDDY 222 NEW MEXICO
16. Check A	ppropriate Box To Indicate N	lature of Notice, Report, or	Other Data
NOTICE OF INTENTION TO: SUBSEQ			QUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING (Other)	ABANDONMENT [*]
(Other)		(NOTE: Report result	s of multiple completion on Well pletion Report and Log form.)
17. DESCRIBE PROPOSED OR COMPLETED OF proposed work. If well is direct	PERATIONS (Clearly state all pertinen		s, including estimated date of starting any cal depths for all markers and zones perti-
casing seat, or 2. Perforate base o in casing. 3. Perforate top of in casing.	set bridge plug near of salt @ 2450' and so (salt @ 1033' and sou ent plug @ surface type	casing seat and cap queeze with 50 sacks neeze with 50 sacks c	pack to production string with 25 sack cement plug. cement leaving 100' plug cement leaving 100' plug cing casing together.
(b). All (c). Hole	e office will be notif plugs will be verifie will be loaded betwe lo not plan to pull an	d en all plugs with 10	
		RECE	15 1982
		NOV	10.000
		O'L MINEBALS	
18. I hereby certify that the thregoing is SIGNED		Area Manager RoswEll	DATE11/11/82
(This space for Federal or SAT)			DATE
CONDITIONS OF APPROVAL, IF			
	A. GILLHAM See Instructions T SUPERVISOR	on Reverse Side	