UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instruction n re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-063441

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

1.

OIL WELL ☒ GAS WELL ☐ OTHER

7. UNIT AGREEMENT NAME

YOUNG UNIT

2. NAME OF OPERATOR

NEWMONT OIL COMPANY

8. FARM OR LEASE NAME

3. ADDRESS OF OPERATOR

P. O. BOX 1305, ARTESIA, NEW MEXICO   88210

9. WELL NO.

21

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FSL & 1980' FEL   Section 20

10. FIELD AND POOL, OR WILDCAT

Young Queen

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 20-18S-32E   NMPM

14. PERMIT NO.

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

3750' G.L.

12. COUNTY OR PARISH   Lea

13. STATE   New Mexico

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(Other) Temporarily 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 pertinent to this work.) *

This well was shut-in with mechanical troubles on June 11, 1975. We intend to
temporarily abandon this well pending study and evaluation.

This approval of temporary
abandonment expires 6-1-77

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

SIGNED _____   TITLE Office Manager   DATE 5/25/76

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JUN 3 1976

BERNARD MOROZ
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side