Form 9-331
(May 1963)

DEPARTMENT OF THE INTERIOR
(Other instructions on reverse side)

GEOLOGICAL SURVEY

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.)

5. LEASE DESIGNATION AND SERIAL NO.: NM - 8269

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: LOWER HOSPAH

9. WELL NO.: 6

10. FIELD AND POOL, OR WILDCAT: SOUTH HOSPAH

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: SEC 12 T17N, R9W

12. COUNTY OR PARISH: McKinley

13. STATE: NM

1. OIL WELL [X] GAS WELL [ ] OTHER

2. NAME OF OPERATOR: Tenneco Oil Company

3. ADDRESS OF OPERATOR: 720 So. Colorado Blvd., Denver, Colorado 80222

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 330 ' FNL and 330 'FEL, Unit _____

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 6953' KB

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

NOTICE OF INTENTION TO:				SUBSEQUENT 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	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) PERFORATE			
(Other)				(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.)*

MIRPUP. PERF'D LOWER HOSPAH 1582 - 1600 w/ 4 JSPF. AN ADDITIONAL 18' OF PAY (1582 - 1600). TOTAL PAY OPEN 69%. RAN PUMP & 2 7/8" TBG. SET TBG @ 1571' KB. HUNG WELL ON.

BEFORE WORK: 13 BOPD, 149 BWPD

AFTER WORK : 18 BOPD, 354 BWPD

RECEIVED
JUN 8 1978
OIL CON. COM.
DIST. 3

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

SIGNED Carley Stallion TITLE: Administrative Supervisor DATE 5/26/78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side