

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 081208

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hospah

9. WELL NO.

13

10. FIELD AND POOL, OR WILDCAT

South Hospah Upper Sd.

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

Sec. 12, T17N, R9W

12. COUNTY OR PARISH

McKinley

13. STATE

New Mex.

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 GAS WELL OTHER Water Injection Well

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

1200 Lincoln Tower Bldg., Denver, Colo. 80203

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

2280 FNL, 1620 FWL, Unit F

14. PERMIT NO.

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

7031' GR

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

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.)*

September 7, 1968 - Date of first injection



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

SIGNED

Don V. Cook

TITLE Production Clerk

DATE

9/19/68

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE