

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

081208

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Hospah South (Upper Sand)

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

Sec. 12, T17N, R9W

12. COUNTY OR PARISH 13. STATE

McKinley

New Mexico

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

1200 Lincoln Tower Bldg., Denver, Colorado 80203

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

At surface

2180' F/NL & 660' F/EL

14. PERMIT NO.

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

6986 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.)*

Spudded 6/11/70, drilled 12 1/4" hole to TD of 71', ran 2 jts of 8 5/8" 24# casing landed @71', cemented with 75 sks. circulated. Drilled out w/7 7/8" hole to TD of 1627', ran 51 jts. of 5 1/2" 15.5# casing landed at 1627', cemented w/100 sacks, released rig, now waiting completion unit as of 6/13/70.

RECEIVED

JUN 18 1970

U. S. GEOLOGICAL SURVEY



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

SIGNED

[Signature]

TITLE

Sr. Production Clerk

DATE

6/15/70

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE