

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

So. Hospah Unit

8. FARM OR LEASE NAME

9. WELL NO.

42

10. FIELD AND POOL, OR WILDCAT

Hospah South (Upper Sand)

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

Sec. 12, T-17-N, R-9-W

12. COUNTY OR PARISH

McKinley

13. STATE

New Mexico

1.

OIL
WELL

☐

GAS
WELL

☐

OTHER

Water Injection

2. NAME OF OPERATOR

TENNECO OIL COMPANY

3. ADDRESS OF OPERATOR

Suite 1200 Lincoln Tower Building, Denver, Colorado 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.)
At surface

3000' FNL and 5' FEL

14. PERMIT NO.

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

7034 GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

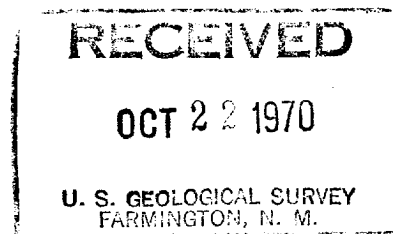
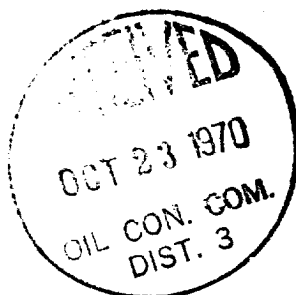
FRAC

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(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.)*

Moved in completion unit 6-25-70, perforated w/2 holes each at 1645, 1649, and 1627, and one hole each at 1633 and 1635, acidized perforations with 500 gals of 15% HCL. Ran Baker Loc-Set Packer at 1585, ran 51 jts of 2-3/8" EUE tubing landed at 1585'. Well SI until 8-27-70, pulled tubing, Frac w/8000# 10-20 sand and 4000 gals Maxigel, cleaned out to PBTD of 1670'. Well SI until 10-19-70, Rerun tubing. Put on injection 10-19-70 Rate of 208 Bbls water @ 600 psi per day.



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

SIGNED

[Signature]

TITLE Sr. Production Clerk

DATE 10-20-70

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

