

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.

MM-081208

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 Gas/Water Injection

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

5' FNL and 1650' FEL

7. UNIT AGREEMENT NAME

South Hospah

8. FARM OR LEASE NAME

9. WELL NO.

41

10. FIELD AND POOL, OR WILDCAT

South Hospah

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

Sec. 12, T17N, R2W

14. PERMIT NO.

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

7004 GR

12. COUNTY OR PARISH

McKinley

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 ☐

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) Recompletion ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well  
Completion or Recombination Report and Log form.)

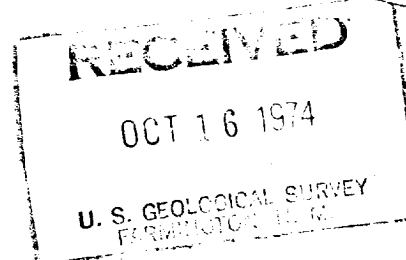
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

8/23/74 - Rig up workover unit, TD 1607

8/24/74 - Pulled 2 3/8 tubing and laid it down. Drilled down to 1637 TD

8/29/74 - Ran Baker Model "D" packer at 1603 and Baker Model "J" at 1534. Ran dual strings of 2 1/16" and 1 1/4"

8/31/74 - Job completed.



18. I her-by certify that the foregoing is true and correct

SIGNED [Signature]

TITLE Senior Production Clerk

DATE 10/11/74

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)Form 9-111, No. 42-11421  
7. LEASE NUMBER AND BEARING NO.

## 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 ☒ **INJECTION**

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

14. PERMIT NO.

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

16.

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURES 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) Shut-In

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

X

(Note: Report results of multiple completion on Well  
Completion or Recompletion Report and Log 4 (Form 9-111).)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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.)\*

STATUS OF WELL:

**ACTIVE INJECTION**

APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED:

**NA**

REASON FOR TEMP ABAND:

**NA**

FUTURE PLANS FOR WELL:

**NA**

APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING:

**NA**

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

SIGNED

D. B. MyersTITLE Division Production Manager DATE December 13, 197

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE