

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on re-
verse side)

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Water Injection</u>	7. UNIT AGREEMENT NAME :
2. NAME OF OPERATOR <u>Tenneco Oil Company</u>	8. FARM OR LEASE NAME <u>Hospah</u>
3. ADDRESS OF OPERATOR <u>P. O. Box 3249 Englewood, CO 80155</u>	9. WELL NO. <u>41</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>1650 FEL</u> <u>5' FNL, 1655' FEL</u>	10. FIELD AND POOL, OR WILDCAT <u>South Hospah, Lower Hospah</u>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, HT, GR, etc.) <u>7004' GR</u>
	11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA <u>Sec. 12, T17N, R9W</u>
	12. COUNTY OR PARISH <u>McKinley</u>
	13. STATE <u>NM</u>

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 PLANE

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.)*

The lease number has been permanently marked on the monument as of August 19, 1987.

RECEIVED
SEP 29 1987
OIL CON. DIV.
DIST. 3

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

SIGNED M. M. McPhee

TITLE Administrative Analyst

DATE Sept. 16, 1987

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

SEP 27 1987
DATE

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

BY

*See Instructions on Reverse Side

NMOCC

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.