	7 7	<del></del>				Form C -103			
NO. OF COPIES RECEIVED	<del></del>						old		
DISTRIBUTION	VENUE OF CONCERNATION COMMISSION						103		
SANTAFE	+	+	NEW MEXICO OII	L CONSE	KYATION COMMISSION	Effective 1-1-30-031-20			
FILE	+-	+				5a. Indicate Type			
U.S.G.S.	-		q			State	Fee X		
LAND OFFICE	<del>  </del>	4				5. State Oil & G			
OPERATOR	1/_								
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 —" (FORM C-101) FOR SUCH PROPOSALS.)									
1		_				7. Unit Agreeme	nt Name		
OIL GAS	۰ Lx	OTHER-	Convert S	.I. Ga	is Well to Injection .				
2. Name of Operator							8. Form or Lease Name		
Tenneco Oil Company							SFP - RR		
3. Address of Operator									
	S	Suite 1200	Lincoln Towe	r Bldg	g Denver, Colo	6	11/21/1		
4. Location of Well						10. Field and Pa	•		
UNIT LETTERH		4620	FEET FROM THE WE	est	LINE AND 1980 FEET FRO	OM done Prese	Nak D		
THE North	LINE,	SECTION 13	TOWNSHIP _	17	RANGE 9	<i>™.(      </i>			
	•					12. County	<i>HHHHH<del>H</del></i>		
	////		15. Elevation (Show			1			
ŽIIIIIIIIIII	777	.111111111		6968	•	McKinley			
15.	Che	eck Appropri	ate Box To Ind	icate N	ature of Notice, Report or C				
NOT	CE	OF INTENTIC	N TO:	1	SUBSEQUE	NT REPORT OF	:		
	_						<b>—</b>		
PERFORM REMEDIAL WORK			PLUG AND ABAN	DON	REMEDIAL WORK	ALTE	RING CASING		
TEMPORARILY ABANDON					COMMENCE DRILLING OPNS.	PLUG	AND ABANDONMENT		
PULL OR ALTER CASING .			CHANGE PLANS	البا	CASING TEST AND CEMENT JOB				
0	_	0 - T-!	<b>.</b>		OTHER				
OTHER CONVERT	to	Gas Injec	Clon	[X]					
17. Describe Proposed or C	omple	eted Operations (	Clearly state all peri	inent deta	ils, and give pertinent dates, includi	ng estimated date of	starting any proposed		
work) SEE RULE 1103			•						
Move in		rvice unit	kill well	with w	ater, and pull tubing.	Perforate	Dakota "D"		
Sand fr	om.	2708' <b>-</b> 16	and 2726	<b>-</b> 29'	W/2 JSPF. Run 3-1/2"	OD tubing wi	.th		
pand II	cet	-2700 - 10	. Acidize	w/1000	gals. 15% HCL. Swab	and flow wel	l to clean		
packer up Ho	ok :	un well fo	r injection.	, =	9	-			
up. no	OR	up were re							
						A. C.	OF THE		
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•						(0)/	CON _ '		
							DIST COM		
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		$\bigcirc$					· · · · · · · · · · · · · · · · · · ·		
18. I hereby certify that the	infor	rmation allove is	true and complete to	the best	of my knowledge and belief.				
. //		2 1/							
2.1	1.5	tinix	τ.	ITLE Sr	. Production Clerk	DATE 3/1	3/72		
SIGNED	- 0	1							
Omini	L			TYPERTO CT	TOTAL WATER TOTAL	. 7	MAR / 1970		
Original Signed	ON A	a. K. Kendr	ੀ ਨੀਟ	LELKO:	LEUM ENGINEER DIST. NO.	Q	ин <b>н</b> д , 1330		