UNITED STATES

	Budget Bureau	No.	42-R14
LEASE			

ONITED STATES	5. LEASE		
DEPARTMENT OF THE INTERIOR	NM-081208		
GEOLOGICAL SURVEY	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	7. UNIT AGREEMENT NAME		
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir, Use Form 9–331–C for such proposals.)	O. FARM OR LEASE NAME		
1. oil gas other Water Injection	Hospah 9. WELL NO.		
2. NAME OF OPERATOR	52 s. WELL NO.		
Tenneco Oil Company	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR P.O. Box 3249, Englewood, CO 80155	Upper Hospah 11. SEC., T., R., M., OR BLK. AND SURVEY OR		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA		
below.) AT SURFACE: 720' FNL, 1850' FWL	Sec. 12, T17N, R9W		
AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE NCKinley NM		
AT TOTAL DEPTH:	14. API NO.		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15 SUSVATIONS (SUSVEDS ASSESSED ASSESSED		
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 7049 GR		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF			
FRACTURE TREAT	· Series · · · · · · · · · · · · · · · · · · ·		
SHOOT OR ACIDIZE REPAIR WELL	1983		
PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9-330.)		
MULTIPLE COMPLETE	3 1 1083 L		
CHANGE ZONES	1000		
ABANDON*	Y CON. DIV.		
	DIST_3		
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is different and true vertical depths for all markers and zones pertinent.)	lirectionally drilled give subsurface locations and		
Acidize w/ 20 bbls 15% FRA @ 2 BPM w/	200 scf/bb1 N ₂ .		
- · · · · · · · · · · · · · · · · · · ·			
Subsurface Safety Valyes Manu. and Type	Set @ Ft.		
18. I hereby certify that the foregoing is true and correct			
SIGNED TITLE Production And	alyst _{DATE}		
(This space for Federal or State off	ice use)		
	DATE		
CONDITIONS OF APPROVAL, IF ANY:	ASCEPTED FOR RECORD		

*See Instructions on Reverse Side

AUG 0 1 1983