GO INTERNATIONAL

CORRELATION LOG

COMPANY TENNECO OIL COMPANY

WELL Hospah #59

FIELD Hospah

COUNTY McKinley STATE N. Mex.

LOCATION:

SEC 12 TWP 17N RGE 9W

OTHER SERVICES:

Jet Perforate

PERMANENT DATUM: GL ELEV. 6994

LOG MEASURED FROM KB 13 FT. ABOVE PERM DATUM

DRILLING MEASURED FROM KB

ELEV.: K.B. 7007

D.F.

G.L. 6994

DATE	6-18-74		
RUN NO.	One		
TYPE LOG	Gamma Ray		
DEPTH-DRILLER			
DEPTH-LOGGER	1657		
BOTTOM LOGGED INTERVAL	1656		
TOP LOGGED INTERVAL	1350		
TYPE FLUID IN HOLE	Water		
SALINITY PPM CL.			
DENSITY LB/GAL.			
LEVEL	Full		
MAX. REC. TEMP DEG. F			
OPR. RIG TIME	1 Hr.		
RECORDED BY	Shelton		
WITNESSED BY	Jones		

RUN NO.	BORE HOLE RECORD BIT	FROM	TO	CASING RECORD SIZE	WGT	FROM	TO

1500

UPPER HOSPAH

1600

LOWER HOSPAH

w/ 9 JSPF

R.D. 1656
T.D. 1657

GO INTERNATIONAL

CORRELATION LOG

COMPANY TENNECO OIL COMPANY

WELL Hospah #59

FIELD Hospah

COUNTY McKinley STATE N. Mex.

LOCATION:

SEC 12 TWP 17N RGE. 9W

OTHER SERVICES:

Jet Perforate

PERMANENT DATUM: GL ELEV. 6994

LOG MEASURED FROM KB 13 FT. ABOVE PERM DATUM

DRILLING MEASURED FROM KB

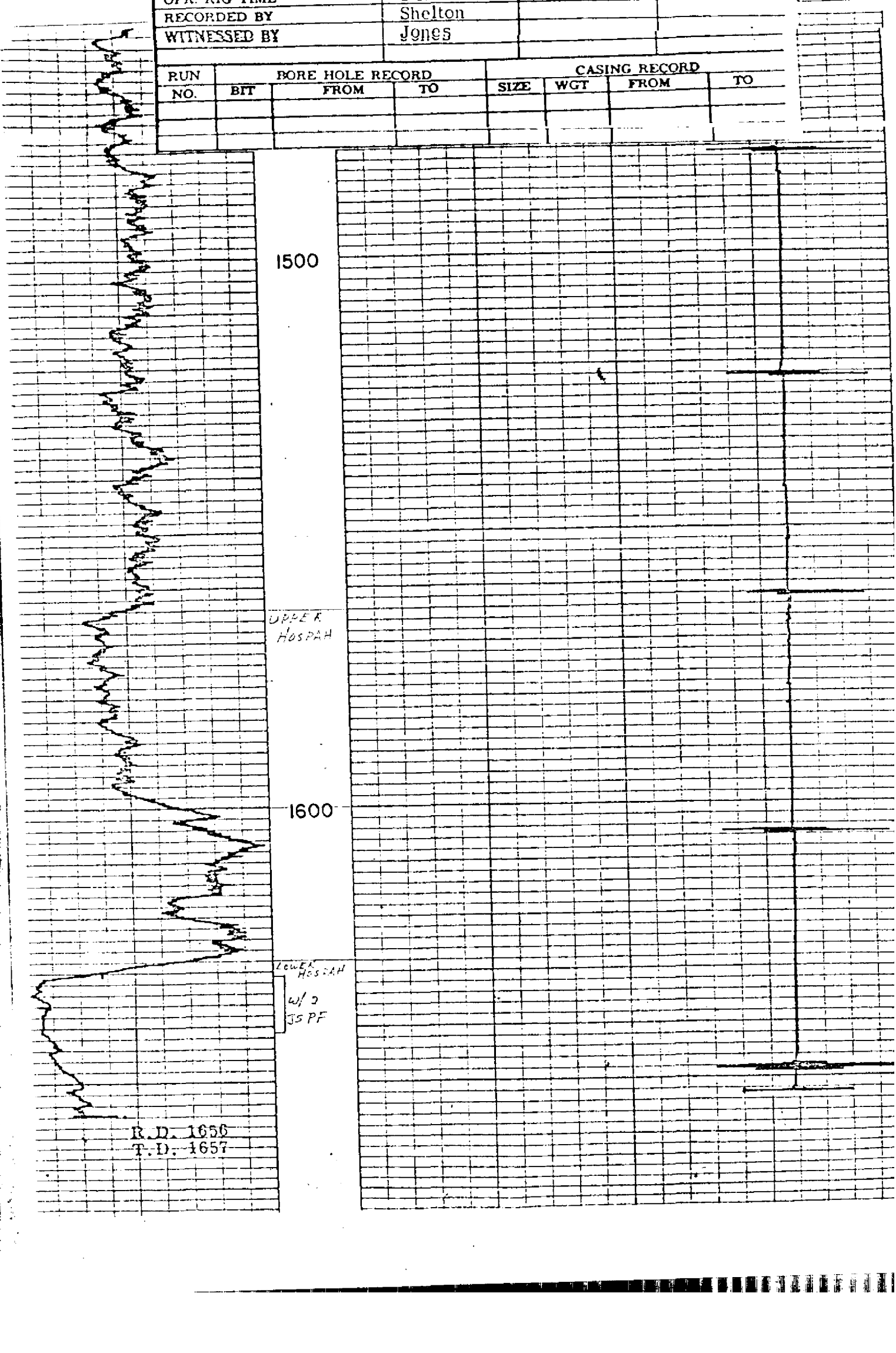
ELEV.: K.B. 7007

D.F.

G.L. 6994

DATE	6-18-74		
RUN NO.	One		
TYPE LOG	Gamma Ray		
DEPTH-DRILLER			
DEPTH-LOGGER	1657		
BOTTOM LOGGED INTERVAL	1656		
TOP LOGGED INTERVAL	1350		
TYPE FLUID IN HOLE	Water		
SALINITY PPM CL.			
DENSITY LB/GAL.			
LEVEL	Full		
MAX. REC. TEMP DEG. F			
OPR. RIG TIME	1 Hr.		
RECORDED BY	Shelton		
WITNESSED BY	Jones		

RUN NO.	BORE HOLE RECORD BIT	FROM	TO	CASING RECORD SIZE	WGT	FROM	TO



Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.: NM-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 Injection Well

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: Tenneco Oil Company

8. FARM OR LEASE NAME: Hospah

3. ADDRESS OF OPERATOR: 1860 Lincoln St., Suite 1200, Denver, Colo. 80295

9. WELL NO.: 59

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 2340 ' FNL and 2500 'FEL, Unit _____

10. FIELD AND POOL, OR WILDCAT: South Hospah lower Sand

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 12, T17N, R9W

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 6994' 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:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	X	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other)			
(Other) Establish injection in Upper Hospah				(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.) *

We propose to perforate the Upper Hospah zone and establish dual injection into this well as follows:

1. Shut in water injection and blow down well.
2. Release packer and POH.
3. Perforate from 1566' - 1596' w/ 4 JSPF.
4. Acidize Upper Hospah zone.
5. Run long injection string with Baker Model 45B lokset packer and Baker 45B Model "B" Snap tension packer and set at 1620' and 1560' respectively.
6. Stab short string into upper packer.
7. Place well on injection.
8. Clean location of all debris.

RECEIVED
JUN 20 1977
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

SIGNED D. D. Myers TITLE Div. Production Manager DATE 6-16-77

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side