

Form 1-4-1
(May 1983)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved,
Budget Bureau No. 42-R1424.

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>Injection Well</u>	5. LEASE DESIGNATION AND SERIAL NO. <u>NM 052931</u>
2. NAME OF OPERATOR <u>Tesoro Petroleum Corp.</u>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>633 17th Street, #2000, Denver, CO 80202</u>	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <u>At surface</u> <u>2316</u> <u>2318' FSL 2310' FEL</u>	8. FARM OR LEASE NAME <u>Hanson Federal</u>
14. PERMIT NO.	9. WELL NO. <u>28</u>
15. ELEVATIONS (Show whether DT, RT, GR, etc.) <u>6916' KB 6903' GL</u>	10. FIELD AND POOL, OR WILDCAT <u>Hospah South Hospah Lower</u>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sand</u> <u>Sec. 6, T17N-R8W</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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(Other) Water Injection ☒ (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.) *

1. Clean out well to PBTD of 1641' GL.
2. Set 2 7/8' tubing and Baker model AD-1 packer at 1558' GL.
3. Injecting 1,200 BWPD @ 320 psi, into lower Hospah formation.
4. Injection began November 21, 1980.



ACCEPTED FOR RECORD

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

SIGNED

TITLE

DATE

(This space for Federal or State office use)

BY

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side