

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse 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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection Well		5. LEASE DESIGNATION AND SERIAL NO. NM-052931	
2. NAME OF OPERATOR Tesoro Petroleum Corp.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 633 17th Street, #2000, Denver, CO 80202		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2310' FEL 990' FSL		8. FARM OR LEASE NAME Hanson Federal	
14. PERMIT NO.		9. WELL NO. 34	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6881' GR 6891' KB		10. FIELD AND POOL, OR WILDCAT Hospah, South Hospah Lower Sand	
		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 6, T17N-R8W	
		12. COUNTY OR PARISH McKinley	
		13. STATE NM	

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) <u>Water Injection</u> <input checked="" type="checkbox"/>	
(Other) <u>Water Injection</u> <input checked="" type="checkbox"/>		(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. Injecting into lower Hospah perforations @ 1566-82'.
2. Injecting into lower Hospah @ rate of 2,200 BWPD @ 320 psi.
3. Injection began November 21, 1980.



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

SIGNED

W. J. Parks

TITLE

Dist Ops. Mgr.

DATE

3/13/81
MAR 23 1981

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

RB
WASHINGTON DISTRICT

*See Instructions on Reverse Side

Nmoco