

(May 1963)

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

TRIPPLICATE\*  
(Insert instructions on reverse side)

Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

USA-NM 7508A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Encino

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 8, T19N R4W

12. COUNTY OR PARISH

Sandoval

13. STATE

N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Tesoro Petroleum Corporation

3. ADDRESS OF OPERATOR

408 First State Bank Bldg., Abilene, Texas 79604

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface

990' FNL & 790' FWL Section 8, T19N R4W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6714 KB

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

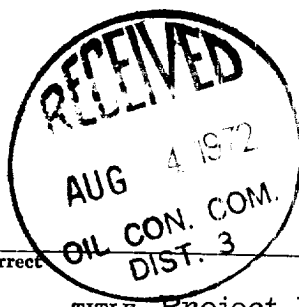
ALTERING CASING

ABANDONMENT\*

(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.)\*

Plugged 11 Sep 71. Filled hole with 10# mud, set cement plugs as follows:  
35 sx 4300-4400, 50 sx 3350-3500, 35 sx 220-2300-, 35 sx 500-600, 35 sx 200-300, 10 sx 0-30, with 4" pipe marker cemented at surface.



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

SIGNED

TITLE Project Engineer

DATE 1 Sep 72

(This space for Federal or State order use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side