

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-0603-8103

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "Bp"

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Tocito Dome Penn. D

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

26-26N-18W-NMPM

12. COUNTY OR PARISH 13. STATE

San Juan

N. Mex.

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 ☐

2. NAME OF OPERATOR

TEXACO, Inc. Prod. Dept. Rocky Mtns. U.S.

3. ADDRESS OF OPERATOR

P. O. Box EE, Cortez, Colorado 81321

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

1980' From the South Line & 1980' From the West Line.

14. PERMIT NO.

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

5580 GR

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.)*

Commenced workover 9-24-74.

Set packer at 6250'. Acidized with 5000 gals. 28 % HCL in three stages.
Max. pressure 2400 psi; avg. pressure 1500 psi @ 9 BPM.
ISIP-Vac.; 15Min. SIP-Vac.

Production before workover - 122 BOPD, 27 BWPD, 1893 GOR.

Production after workover - 141 BOPD, 24 BWPD, 1219 GOR.

Increase in production - 19 BOPD.



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

SIGNED Alvin R. Mary

TITLE Field Foreman

DATE 1-24-75

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side