

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.

NOO-C-14-20-2727

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 ☐

2. NAME OF OPERATOR

Texaco, Inc.

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

NE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec. 26
510' FNL & 1980' FWL

14. PERMIT NO.

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

5603' GR

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "BP"

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Tocito Dome

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

26-T26N-R18W

12. COUNTY OR PARISH 13. STATE

San Juan

N. Mex.

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 perti-
nent to this work.)*

Commenced workover 12-9-74. Set packer at 6340'. Fraced well with 1500
gals. 28% HCL. Average psi 3700 @ 8 BPM. ISIP=0. 15 Min. SIP=0. Put
well back on production.

Production before workover - 27 BOPD, 14 BWPD.

Production after workover - 30 BOPD, 11 BWPD.



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

SIGNED

Alvin R. Mary

TITLE

Field Foreman

DATE

2-26-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UGGS (3), NMOGCC (5), Navajo Tribe, GLE, HNB, ARM

*See Instructions on Reverse Side