

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 Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "AR"

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Tocito Dome Penn. D

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

27-26N-18W-NMPP

12. COUNTY OR PARISH

San Juan

13. STATE

N. Mex.

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

660' From the North Line and 1980' From the West Line

14. PERMIT NO.

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

5668' 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.)*

Commenced workover 9-12-74.

Set packer at 6114'. Acidized with 1500 gals. 28% HCL. Pumped in 7 bbls.
Tretolite Corrossion & scale inhibitor followed with 250 Bbls. Prod. water.

Production prior to workover - 101 BOPD, 486 BWPD, 1745 GOR.

Production after workover - 242 BOPD, 348 BWPD, 2165 GOR.

Increase in production - 141 BOPD.



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

SIGNED

Alvin R. Mearns

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

USGS (3) . NMOCC (5) . NAVAJO TRIBE, HHB, GLE, ARM