

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on re-
verse 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. 14-23-603-2172
2. NAME OF OPERATOR Humble Oil & Refining Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR P. O. Box 122, Durango, Colorado 81301	7. UNIT AGREEMENT NAME H.W. Cha Cha
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SW SE (660' FRL & 1920' FRL) of Section 35	8. FARM OR LEASE NAME H.W. Cha Cha
14. PERMIT NO.	9. WELL NO. 34-35
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5200' FB - 5168' GL	10. FIELD AND POOL, OR WILDCAT Cha Cha Cellar
	11. SEC., T., R., M., OR BUC. AND SURVEY OR AREA Sec. 34-23-603-2172
	12. COUNTY OR PARISH San Juan
	13. STATE New Mexico

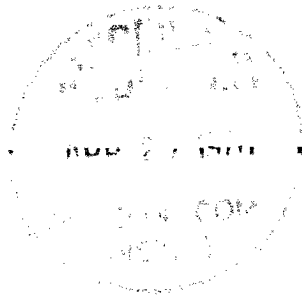
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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 checked="" 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) <input 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.)*

In an effort to increase production from this well we propose to fracture treat with 14,600 gallons of fluid and 32,400 of sand.



APR 27 1970

cc: Minerals Supervisor - Navajo Tribe
El Paso Natural Gas Products - Odessa
Clinton Oil Company - Wichita

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

SIGNED J. Ray Hernandez	TITLE District Superintendent	DATE 4-15-70
(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		