

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse 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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER To convert to water injection	
2. NAME OF OPERATOR Tenneco Oil Company	
3. ADDRESS OF OPERATOR 1860 Lincoln St., Suite 1200, Denver, Colorado 80203	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660 FNL and 660 FWL	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3693 KB

5. LEASE DESIGNATION AND SERIAL NO. LC 067230	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME Lusk (Seven Rivers)	
8. FARM OR LEASE NAME	
9. WELL NO. 3 north Lusk - SR 8-1-81	
10. FIELD AND POOL, OR WILDCAT Lusk (Seven Rivers)	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T19S, R32E	
12. COUNTY OR PARISH Lea	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 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.)
(Other) Convert to water inj. <input checked="" type="checkbox"/>			

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.)*

1. MIRUPU Pull tubing. Then run tubing and load hole with water.
2. Set Baker Model A-D tension packer \pm 150 above perforations.
3. Clean up area.
4. Will establish injection at later date.

WFX-432

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

SIGNED D. D. Myers

TITLE Div. Prod. Manager

DATE 2-9-76

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____