

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-8269
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Suite 1200 Lincoln Tower Building - Denver, Colorado 80203		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 550' F/NL, 2370' F/WL		8. FARM OR LEASE NAME Hospah
14. PERMIT NO.		9. WELL NO. 32
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7048 GR		10. FIELD AND POOL, OR WILDCAT Hospah South (Lower Sand)
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, T-17-N, R-9-W
		12. COUNTY OR PARISH McKinley
		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 checked="" 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"/>	
(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.)*

Well Spudded 9-5-69, drilled to 68', ran 2 jts of 10-3/4" 32.75# casing landed @ 64', cemented w/70 sks - circulated. Drilled to 1632', logged, ran 52 jts of 7" 20# casing Landed @ 1632', cemented w/125 sks.

9-9-69 -- Moved in completion unit. Drilled out to 1647', Ran 50 jts of 2-7/8" EUE 6.50# tubing, landed @ 1607', Ran 63 jts of 3/4" X25' sucker rods w/2-1/4" Pump. Now testing well.



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

SIGNED

TITLE Sr. Production Clerk

DATE

9-12-69

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side