5. LEASE

1-149-IND-9109

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS	Navajo Tribe AA 7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas well other	9. WELL NO.
2. NAME OF OPERATOR	1
Texaco Inc.	10. FIFED OR WILDCAT NAME.
3. ADDRESS OF OPERATOR	Basin Dakota
P.O. Box EE Cortez, CO 81321 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See Space 17 below.)	11. SEC., T., R., M., OR BUK AND SURVEY OR AREA 8-19-278-11W
AT SURFACE: P-19-27N-11W	12. COUNTY OF PARISH 13. STATE
AT TOP PROD. INTERVAL:	San Juan New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA	15 CHATIONS (CHOW OF LOD AND HID)
	15. ELEVATIONS (SHOW OF, KDB, AND WD) 6194 KB
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	Land Control of the C
TEST WATER SHUT-OFF STREAM FRACTURE TREAT	
SHOOT OR ACIDIZE	
REPAIR WELL [] ST. PULL OR ALTER CASING []	AOTE: Report resums of multiple completion or it. + change on Form 9-370
MULTIPLE COMPLETE	and the state of t
CHANGE ZONES	
ABANDON* PC zone	
(other)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertine	directionally drilled, give subsurface locations and
5-13-79. Squeezed csg leak interval	3848-89 with 200 sx cmt-
squeeze communicated with PC perfs 1785-1810. Squeezed PC perfs	
with 200 sx cmt-would not hold. Resqueezed with 50 sx cmt.	
Squeezed csg leak with 35 sx cmt-woul	d not hold. Resqueezed
leak with 35 sx cmt-cmt never set up. Resqueezed with 50 sx cmt.	
Set CIBP at 6478'. Swabbed well in,	and returned well to
production 6-7-79.	
Test before: 60 MCFPD	19 619
Test after: 103 MCFPD	OIL COLL 3M
Subsurface Satety Valve: Manu, and Type	Set de
18. I hereby certify that the foregoing is true and correct	Control of the Contro
SIGNED (Ston & Many TITLE Field Fore	man DATE 7-12-79
(This space for Ecderal or State of	ffice use:
APPROVED BY CONDITIONS OF APPROVAL, IF ANY: LEGGE (A) NAME CO (B) CAN ANY TO BE	DATE
USGS(4) NMOCC(3) GLE ARM JHP	
*See Instructions on Reverse Side	

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