

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(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. 14-20-603-2034
2. NAME OF OPERATOR Humble Oil & Refining Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR P O Box 120, Denver, Colorado 80201	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 660' SNL and 660' WEL Section 9	8. FARM OR LEASE NAME Navajo Tribe of Indians "F"
	9. WELL NO. 106
	10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 9-31N-17W
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5232 GR
	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 type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" 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.) *

6-10-71 - Ran tubing with Baker packer set at 525'. Treated perfs 966-990' as follows:

Fraced with
20,000 gallons K-1 emulsion, 6,000# 20-40 sand, 35,000# 10-20 sand, and 1,000 gallons lease crude.
Max. pressure 1900#, Injection rate 10.9 BPM, final pump pressure 1500#. Immediate SIP 800#, 15 minutes 800#, 20 hours 380#. 6-10-71 to 6-23-71 recovering load oil. 6-24-71 - Tested at rate of 185 BO, 90 BWPD. Production prior to workover 70 BO, 20 BW. Job Complete.

cc: 2 - O&G Commission New Mexico
1 - Minerals Supervisor
1 - Midland

RECEIVED
JUL 6 1971

U. S. GEOLOGICAL SURVEY

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

Acting

SIGNED

TITLE

District Superintendent

DATE

6-29-71

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side