

N. M. O. C. C. COPY  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN DUPLICATE  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1121

## 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 checked="" type="checkbox"/> OTHER <input type="checkbox"/> <i>Water Injection</i>	5. LEASE DESIGNATION AND SERIAL NO. <i>NM 0610</i>
2. NAME OF OPERATOR <i>Tenneco oil company</i>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>Box 1031, Midland, Texas 79701</i>	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 <i>660' FNL + 1980' FEL</i>	8. FARM OR LEASE NAME <i>Spr. Henshaw Premier Unit</i>
14. PERMIT NO.	9. WELL NO. <i>5</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3761'</i>	10. FIELD AND POOL, OR WILDCAT <i>Henshaw, West (Grayburg)</i>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 18, T-16-S, R-30-E</i>
	12. COUNTY OR PARISH <i>Eddy</i>
	13. STATE <i>New Mex.</i>

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) *Convert to Water Inj.* ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

(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.)\*

4-1-69

1. Pulled tubing, gas lift valves and packer
2. Checked TD at 2715'
3. Ran injection tubing + packer set at 2629.
4. Began injection 6-7-69

RECEIVED

AUG 1 - 1969

O. C. C.  
ARTESIA, OFFICE

RECEIVED

JUL 31 1969

U. S. GEOLOGICAL SURVEY  
ARTESIA, N. M.

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

SIGNED

*L. M. Williams*

TITLE

*Production Engineer*

DATE

*7-30-69*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL ONLY

TITLE

DATE

ACCEPTED FOR RECORD PURPOSES ONLY

District Engineer

ACTING

\*See Instructions on Reverse Side

JUL 31 1969  
Date