

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT 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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Water Injection Well</u>		5. LEASE DESIGNATION AND SERIAL NO. <u>12335</u>
2. NAME OF OPERATOR <u>Tenneco Oil Company</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME :
3. ADDRESS OF OPERATOR <u>Suite 1200 Lincoln Tower Bldg., -Denver, Colorado 80203</u>		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <u>At surface 1775' F/NL and 620' F/WL</u>		8. FARM OR LEASE NAME <u>Hospah</u>
14. PERMIT NO.		9. WELL NO. <u>51</u>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>7073 Gr</u>		10. FIELD AND POOL, OR WILDCAT <u>Hospah (Upper)</u>
		11. SEC., T., R., M., OR BLK. AND SERIAL OR AREA <u>Sec, 12, T-17-N, R-9-W</u>
		12. COUNTY OR PARISH <u>McKinley</u>
		13. STATE <u>New Mexico</u>

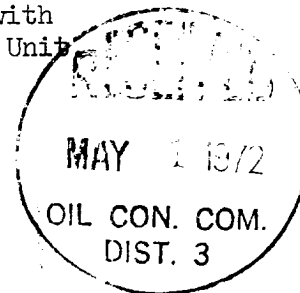
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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"/>	

(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 4-16-72 with 12-1/4" hole and drilled to 64', ran 2 Jts. of 8-5/8" 24# casing landed at 64' cemented with 50 sacks circulated. Tested casing and B.O.P. to 1000 psi, held ok. Drilled out with 7-7/8" hole to T.D. of 1662' on 4-17-72, logged, ran 52 Jts. of 5-1/2" 15.5# casing landed at 1662', cemented with ~~1500~~ 150 sacks. Released rig 4-17-72. Now waiting on completion Unit



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

SIGNED [Signature] TITLE Sr. Production Clerk DATE 4-24-72

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: