

UNITED STATES  
DEPARTMENT OF THE INTERIOR

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Form approved.  
Budget Bureau No. 42-R1424

GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT TO DRILL OR DEEPEN OR PLUG BACK" 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. <b>NM 067081</b>	
2. NAME OF OPERATOR <b>TENNECO OIL COMPANY</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <b>Box 1031 MIDLAND, TEXAS 79701</b>		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		8. FARM OR LEASE NAME <b>INSALL FEDERAL COM</b>	
14. PERMIT NO.		9. WELL NO. <b>1</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>4226 DF</b>		10. FIELD AND POOL, OR WILDCAT <b>VADA BOUGH "C"</b>	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>660' FSL; 660' FWL, UNIT M, SEC 12, T9S, R34E, NMPM</b>		12. COUNTY OR PARISH <b>LEA</b>	
		13. STATE <b>NM</b>	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <b>5 1/2" CASING</b>	

(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.)\*

6-6-68

RAN 301 JTS 5 1/2" N-80° J-55 17" CASING SET AT 9899'  
CEMENTED WITH 175 SX 50-50 POZ MIX AND 100 SX CLASS  
C INCOR. TOP CEMENT 8330'. PD 8:45 AM WOC 24 HRS  
TESTED CASING 2000# FOR 30 MIN - HELD OK  
PREPARE TO COMPLETE

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

SIGNED Normed K. Karasick

TITLE SR. PROD CLERK

DATE 6-13-68

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

JUN 17 1968  
A. H. BROWN  
DISTRICT ENGINEER

DATE \_\_\_\_\_