

Subsequent Report of Abandonment

FILE NOTATIONS

Entered in NID File
Entered On SR Sheet _____
Location Map Pinned
Card Indexed
IWR for State or Fee Land _____

Checked by Chief PWB
Copy NID to Field Office _____
Approval Letter 7-18-66
Disapproval Letter _____

COMPLETION DATA:

Date Well Completed _____ Location Inspected _____
OW _____ WW _____ TA _____ Bond _____
GW _____ OS _____ PA _____ State of Fee Land _____

LOGS FILED

Driller's Log _____
Electric Logs (No.) 3
E _____ I _____ E-I GR _____ GR-N _____ Micro _____
Lat _____ MI-L _____ Sonic _____ Dyn. S _____

Acoustic Velocity log
Guard log

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
 DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
 OIL WELL GAS WELL OTHER SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
TEXACO Inc. *Drilling Unit #4*

3. ADDRESS OF OPERATOR
Box 810, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
 At surface At proposed prod. zone
820' from South line and 500' from West line
Same *NW SW SW*

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
Approx. 6 1/2 miles southwest of Ismay Trading Post

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
500' to lease line and drlg unit line

16. NO. OF ACRES IN LEASE
2560 ✓

17. NO. OF ACRES ASSIGNED TO THIS WELL
80 ✓

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
1820' SW of Well No. 8 ✓

19. PROPOSED DEPTH
6010' ✓

20. ROTARY OR CABLE TOOLS
Rotary ✓

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
5140' GR

22. APPROX. DATE WORK WILL START*
July 19, 1966 ✓

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4	8-5/8" ✓	24# ✓	200' ✓	circulate
7-5/8	5-1/2" ✓	14# ✓	5100' ✓	•
7-3/8	5-1/2" ✓	15.5# ✓	6010' ✓	

*A sufficient amount to bring cement 600' above pay zone. Casing will be cemented in two stages with DV tool set below water sands and cement circulated from DV tool to surface. ✓

FORMATION TOPS AS EXPECTED (APPROX.)

Monaker Trail	4860' ✓
Ismay	5810' ✓

*C.L.
F.R.*

VERBAL APPROVAL TO DRILL THIS WELL RECEIVED JULY 15, 1966, FROM MR. CLEON B. FEIGHT OF THE UTAH OIL AND GAS CONSERVATION COMMISSION.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED *C.P. Farnum* TITLE **District Superintendent** DATE **7-15-66**

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

0/100

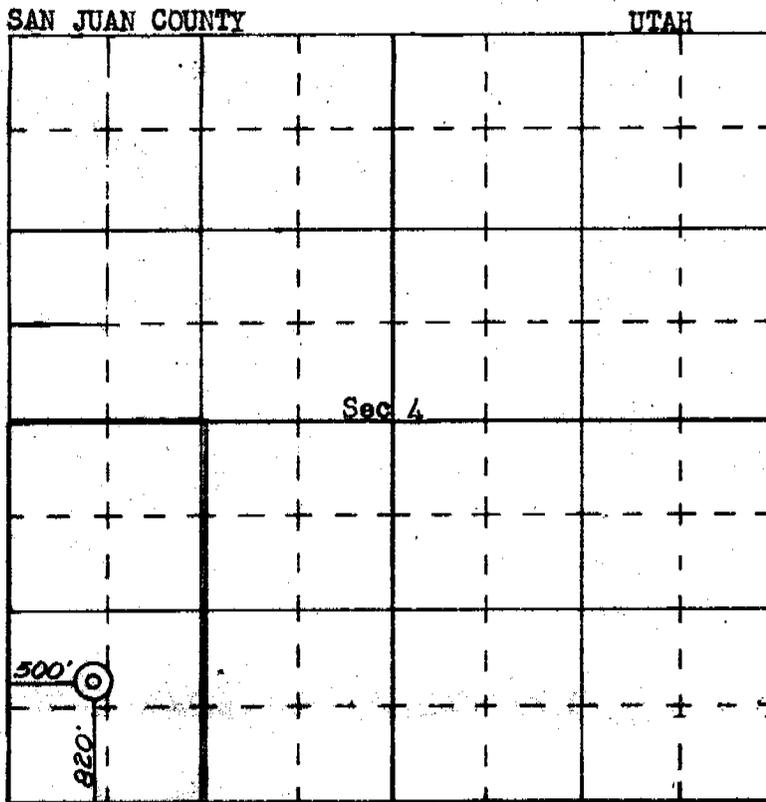
COMPANY TEXACO INC

LEASE NAVAJO TRIBE "AC" WELL NO. 11

SEC. 4 T. 41 SOUTH R. 26 EAST, S.L.M.

LOCATION 820 FEET FROM THE SOUTH LINE AND
500 FEET FROM THE WEST LINE

ELEVATION 5140.0



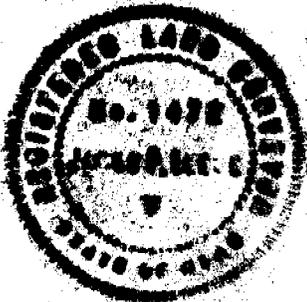
SCALE—4 INCHES EQUALS 1 MILE

THIS IS TO CERTIFY THAT THE ABOVE PLAT WAS PREPARED FROM FIELD NOTE OF ACTUAL SURVEYS MADE BY ME UNDER MY SUPERVISION AND THAT THE SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

James P. Leese
Registered Land Surveyor.

JAMES P. LEESE
UTAH REG. NO. 1472

SEAL:



SURVEYED July 14, 1966

SAN JUAN ENGINEERING COMPANY, FARMINGTON, N. M.

July 15, 1966

TEXACO Inc.
Box 810
Farmington, New Mexico

Re: Well No. Navajo Tribe "AC" #11
" Sec. 4, T. 41 S., R. 26 E.,
San Juan County, Utah.

Gentlemen:

Insofar as this office is concerned, approval to drill the above mentioned well is hereby granted in accordance with the Order issued in Cause No. 109-1 designating this well as the well for Drilling Unit No. 4.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately notify the following:

PAUL W. BURCHELL, Chief Petroleum Engineer
Home: 277-2890 - Salt Lake City, Utah
Office 328-5771 - 328-5772 - 328-5773

Enclosed please find Form OGCC-8-X, which is to be completed if water sands (aquifers) are encountered while drilling, particularly accessible near surface water sands. Your cooperation with respect to completing this form will be greatly appreciated.

Very truly yours,

OIL & GAS CONSERVATION COMMISSION

GLEON B. FREIGHT
EXECUTIVE DIRECTOR

CBF:cm
cc: P. T. McGrath, District Engineer
Box 959
Farmington, New Mexico

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT 1 DATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-2058

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "AC"

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

McElmo Mesa

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

4, T41S, R26E, S1M

12. COUNTY OR PARISH

San Juan

13. STATE

Utah

1.

OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

Box 810, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

820' from South line and 500' from West line

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5156 DF

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)

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.)*

Spudded 7:30 A.M., 7-20-66.

Drilled 11" hole to 212' and cemented 202' of 8-5/8" casing at 212' with 100 sacks of Class A cement with 2% calcium chloride added, followed by 50 sacks of Class A cement. Cement circulated. Tested casing with 800 psi for 15 minutes. Casing tested okay.

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

SIGNED

[Signature]

TITLE

District Superintendent

DATE

8/24/66

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DATE*
(Other instructions on reverse 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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR TEXACO Inc.		8. FARM OR LEASE NAME Navajo Tribe "AC"	
3. ADDRESS OF OPERATOR Box 810, Farmington, New Mexico 87401		9. WELL NO. 11	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 820' from South line and 500' from West line		10. FIELD AND POOL, OR WILDCAT McKino Mesa	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5156' DF	
		12. COUNTY OR PARISH San Juan	13. STATE Utah

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.)*

Drilled 7-5/8" hole to 5965' and cemented 5954' of 5-1/2" casing at 5965' in two stages. Set casing packer 58' off bottom and DV tool at 1763'. Cemented first stage through float collar with 305 sacks of regular neat cement. Left 100' cement plug on top of packer. Cemented second stage through DV tool with 473 sacks of 50:50 Pozmix with 4% gel added, followed by 50 sacks of regular neat cement. Cement circulated. Drilled out two stage tool. Tested casing before and after drilling two stage tool with 1200 psi for 30 minutes. Casing tested okay.

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

SIGNED *[Signature]* TITLE District Superintendent DATE 8/24/66

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT [redacted] CATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-2058

6. INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "AC"

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

Melino Mesa

11. SEC. T., R., M., OR SW. AND SURVEY OR AREA

4, T41S, R36E, S1M

12. COUNTY OR PARISH 13. STATE

San Juan Utah

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 GAS WELL OTHER

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

Box 810, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

820' from South line and 500' from West line

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5156' DF

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)

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.)*

Total Depth 5965'.

Perforated 5-1/2" casing from 5900' to 5910' with 20 jet shots. Treated perforations 5900' to 5910' with 1000 gallons of 15% NE acid. Formation broke down at 4000 psi. Pumped 2-1/2 barrels of acid into formation at 3200 psi, balance of acid into formation at 0 psi. Swabbed one hour and well started flowing. Swabbed and flowed 34-1/2 barrels of lead water, 24-1/2 barrels of acid water, and 194 barrels of new oil in three hours. Killed well and perforated 5-1/2" casing through tubing from 5850' to 5858' with 20 jet shots. Treated perforations 5850' to 5858' with 2000 gallons of 15% NE acid. Treating pressure 3600 to 800 psi with an average injection rate of 2-1/2 barrels per minute. Instant shut-in pressure 0 psi.

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

SIGNED

[Signature]

TITLE

District Superintendent

DATE

8/25/66

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-2058

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "AC"

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

McElmo Mesa

11. SEC., T., R., M., OR BLOCK AND SURVEY OR ARDA

4, T41S, R26E, S1M

12. COUNTY OR PARISH

San Juan

13. STATE

Utah

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other _____

2. NAME OF OPERATOR
TEXACO Inc.

3. ADDRESS OF OPERATOR
Box 810, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface **820' from South line and 500' from West line**
At top prod. interval reported below **same**
At total depth _____

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUNDED **7-20-66** 16. DATE T.D. REACHED **8-11-66** 17. DATE COMPL. (Ready to prod.) **8-17-66** 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* **5156' DF** 19. ELEV. CASINGHEAD **5147'**

20. TOTAL DEPTH, MD & TVD **5965'** 21. PLUG, BACK T.D., MD & TVD **5955'** 22. IF MULTIPLE COMPL., HOW MANY* **-** 23. INTERVALS DRILLED BY ROTARY TOOLS **0' - 5965'** CABLE TOOLS **-**

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
5850' to 5858' and 5900' to 5910' in the McElmo Mesa formation 25. WAS DIRECTIONAL SURVEY MADE **yes**

26. TYPE ELECTRIC AND OTHER LOGS RUN **Acoustic Velocity, Induction-Electric, Guard** 27. WAS WELL CORED. **yes**

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	212'	11"	150 sacks	None
5-1/2"	14#, 15.5#	5965'	7-5/8"	828 sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
None				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8"	5830'	5830' Hanging

31. PERFORATION RECORD (Interval, size and number)

5850' to 5858' with 20 jet shots
5900' to 5910' with 20 jet shots

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5850--5858'	2000 gallons 15% NE acid
5900--5910'	1000 gallons 15% NE acid

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)					
8-15-66	Flowing	Producing					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
8-21-66	24	-	→	588	446	392	758
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
250 ✓	900 ✓	→	588 ✓	446 ✓	392	44°	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) **Sold - El Paso Natural Gas Co.** TEST WITNESSED BY **V. K. McDaniel**

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED General TITLE **District Accountant** DATE **9/1/66**

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Stacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		38. GEOLOGIC MARKERS	
FORMATION	TOP	DESCRIPTION, CONTENTS, ETC.	NAME
	BOTTOM		MEAS. DEPTH
			TOP
			FROM VERT. DEPTH
Shinarump	2923'	Core #1 5815- to 5830'. Recovered 14' black limy shale and dolomite 1' dolomite and slight bleeding of oil.	
Organ Rock	3106'	Core #2 - 5830' to 5883'. Recovered 3 1/2' black calcareous shale, 40 1/2' very dark grey limestone, 9' dolomite and bleeding oil.	
Hosaker Trail	4860'	Core #3 - 5883' to 5937'. 33' limestone with scattered vugs and dolomite and bleeding oil, 17' dolomite and calcareous shale, 3' limestone and dolomite, 1' calcareous shale.	
Ismy	5795'		

1966
6 1966

FORM OGCC-8-X
FILE IN QUADRUPLICATE

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
348 EAST SOUTH TEMPLE
SUITE 301
SALT LAKE CITY, UTAH

REPORT OF WATER ENCOUNTERED DURING DRILLING

Well Name & Number Navajo Tribe "AC" #11
Operator TEXACO Inc. Address Box 810 Farmington, N.M. Phone 325-7553
Contractor Cactus Drilling Corp. Address Box 32 Midland, Texas Phone
Location SW $\frac{1}{4}$ SW $\frac{1}{4}$ Sec. 4 T. 41 S R. 26 E San Juan County, Utah.

Water Sands:

<u>Depth</u>		<u>Volume</u>	<u>Quality</u>
From	To	Flow Rate or Head	Fresh or Salty
1.	None		
2.			
3.			
4.			
5.			

(Continued on reverse side if necessary)

Formation Tops:

Shinarump 2923'
Organ Rock 3106'
Honaker Trail 4860'
Ismay 5795'

Remarks:

- NOTE:
- (a) Upon diminishing supply of forms, please inform the Commission.
 - (b) Report on this form as provided for in Rule C-20, General Rules and Regulations and Rules of Practice and Procedure, (See back of form).
 - (c) If a water analysis has been made of the above reported zone, please forward a copy along with this form.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THIS MANNER*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-2058

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "AC"

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

McElmo Mesa

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

4, 41S, 26E, SLM

12. COUNTY OR PARISH

San Juan

13. STATE

Utah

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 810, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

820' from South Line and 500' from West Line

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5156' DF

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)

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.)*

Proposed remedial work is for the purpose of determining source of water and reducing water cut to permit additional oil production. Procedure for workover will be as follows:

Set bridge plug on bottom and packer at 5885' and pump test well. Set bridge plug at 5885' and packer at 5830' and pump test well. If water with very little oil is produced from the lower zone, with no communications between 5850' and 5900', set a bridge plug at 5880' and produce from 5850' to 5858'. If essentially all water is produced from the upper zone, squeeze with 100 sacks of low fluid loss cement and produce well from 5900' to 5910'. If the test indicates that the water production is common to both zones, no attempt is to be made to shut off water.

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

SIGNED

C. P. Farmer
C. P. Farmer

TITLE

District Supt.

DATE

4-18-67

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT (Other instructions on reverse side) INDICATE*

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>		5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-2058
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR TEXACO Inc.		8. FARM OR LEASE NAME Navajo Tribe "AC"
3. ADDRESS OF OPERATOR Box 810, Farmington, New Mexico 87401		9. WELL NO. 11
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 820' from South line and 500' from West line		10. FIELD AND POOL, OR WILDCAT McElmo Mesa
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 4, T41S, R26E, S1M
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 5156' DF	12. COUNTY OR PARISH San Juan
		18. STATE Utah

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 checked="" 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) _____	
(Other) _____		<small>(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small>	

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.)*

Remedial work was for the purpose of determining source of water and reducing water cut to permit additional oil production. Procedure was as follows:

Pulled rods and tubing. Reran tubing with retrievable bridge plug and packer. Set bridge plug on bottom, packer at 5874' and tested perforations 5900' to 5910'. Pumped an average of 107 barrels of oil and 749 barrels of water per day. Set bridge plug at 5875' and left packer swinging at 5810'. Tested perforations 5850' to 5858'. Pumped an average of 64 barrels of oil and 562 barrels of water per day. Pulled bridge plug and packer and reran rods and tubing. On 24 hour test ending on 6-4-67, well pumped 90 barrels of 41.4° gravity oil and 614 barrels of water. Length of pump stroke 168" with 11 strokes per minute with a 2-3/4" pump.

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

SIGNED SIGNED: C. P. FARMER TITLE District Superintendent DATE 6/23/67

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

October 26, 1970

Texaco Inc.
Box 810
Farmington, New Mexico 87401

Re: Subsequent Reports

Gentlemen:

This letter is to advise you that the subsequent reports for the following wells are due this office and as yet have not been filed as per our Rules and Regulations.

Navajo Tribe AC 11 - 4-41S-26E - San Juan Co.
Subsequent Report of Abandonment

Aneth Unit F-221 - 21-40S-24E - San Juan Co.
Subsequent Report of Converting to Water Injection

Thank you for your prompt attention to this request.

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

SCHIEREE DeROSE
SUPERVISING STENOGRAPHER

:sd

POOR COPY

UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424.

GEOLOGICAL SURVEY

RECEIVED MAY 16 1970 U.S. GEOLOGICAL SURVEY SALT LAKE CITY, UTAH

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.)

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-2058

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "AC"

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

McKlmo Mesa

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

4-T41S, R26E, S1M

12. COUNTY OR PARISH 13. STATE

San Juan

Utah

1. OIL WELL [X] GAS WELL [] OTHER []

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

Box 810, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface

820 ft f/So & 500 ft. f/W Lines

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

5156 DF

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* [X]

CHANGE PLANS []

SUBSEQUENT REPORT OF:

WATER SHUT-OFF []

FRACTURE TREATMENT []

SHOOTING OR ACIDIZING []

(Other) []

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.)*

Well is uneconomical to produce @ 1.3 BOPD & 152 BWPD. Water shut off attempted but equal percentages of water come from all producing zones. Therefore well will be plugged and abandoned as follows:

Spot 36 sack cement plug from 5965 (PBSD) to 5750. Fill hole w/mud and run 4 way perforating gun & perforate 4 shots @ 3108 KB. Spot 50 sacks of cement @ perfs (3108). With bradenhead pressure displace into perfs w/ surface casing annulus open and leave minimum 100 foot cement plug inside casing above perfs. Spot 10 sack plug @ surface, erect marker & clean location.

APPROVED BY DIVISION OF OIL & GAS CONSERVATION

DATE 5-14-70

BY Paul H. Birchall

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

SIGNED

[Signature]

TITLE

District Superintendent

DATE

5/14/70

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THIS MANNER*
(Other instructions on reverse side)

6.31 (W)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-2058

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "AC"

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

McElmo Mesa

11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA

S4-T41S-R26E-SLM

12. COUNTY OR PARISH 13. STATE

San Juan

Utah

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 GAS WELL OTHER

2. NAME OF OPERATOR
TEXACO Inc., Prod. Dept. (West)

3. ADDRESS OF OPERATOR
P. O. Box 810, Farmington, N.M. 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

820' f/So. & 500' f/W lines

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5156 DF

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)

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.)*

12-13 - Set BOP and ran 2-3/8" tbg. open ended to TD. Spotted 36 sx. class A cx from 5965 over 5 1/2" csg. perfs @ 5910-5900, 5858-5850, and fill up to approx. 5750. Displaced hole w/mud. Perf. 5 1/2" csg. @ 3108 w/4 shots.

Ran 100 jts. 2-3/8" tbg open ended @ 3120. Spotted and squeezed 37 sx class A cx into perfs @ 3108 w/braden head press. leaving cx 100' above perfs in 5 1/2" w/surface pipe valve open. No press. encountered. Spotted 10 sack plug in top of hole. Cleaned location and moved out.

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

SIGNED

H. L. Eaton

TITLE

District Superintendent

DATE

PA. DATE

2/25/71

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

USGS(3) OCCC(2) Navajo Tribe-HHB-WLW-HAH
Farm SLC

*See Instructions on Reverse Side