

Gluggels Bandana

FILE NOTATIONS

Entered in NID File

Checked by Chief

PMB

Entered On S R Sheet

Copy NID to Field Office

Location Map Pinned

Approval Letter

Card Indexed

Disapproval Letter

IWR for State or Fee Land

COMPLETION DATA:

Date Well Completed

Location Inspected

OW

WW

TA

Bond released

State of Fee Land

GW

OS

PA

LOGS FILED

Driller's Log

Electric Logs (No.)

E

I

E-I

GR

GR-N

Micro

Lat.

Mi-L

Sonic

Others

*Bore hole compensated
Depth Control*

**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.

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.)*
 At surface
570' from South line and 2120' from East line
 At proposed prod. zone
Same *SW, SW, SE*

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

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
570' to lease line
520' to drlg line
1860' SE of well #8X

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.
1860' SE of well #8X

19. PROPOSED DEPTH
5685'

20. ROTARY OR CABLE TOOLS
Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
4835' GR

22. APPROX. DATE WORK WILL START*
11-11-66

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17 1/2"	13-3/8" ✓	48#	100' ✓	Circulate
12 1/2"	8-5/8" ✓	24#	1500' ✓	Circulate
7-7/8"	5 1/2" ✓	14#	4700' ✓	•
7-7/8"	5 1/2" ✓	15.5#	5685'	•

*Sufficient amount to cover pay zone with 600'

FORMATION TOPS AS EXPECTED (Approx.)

Honaker trail.	4535'
Ismay.	5500'
Total Depth.	5685' ✓

43-037-20162

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. [Signature]* TITLE **District Superintendent** DATE **11/7/66**

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

COMPANY Texaco Inc.

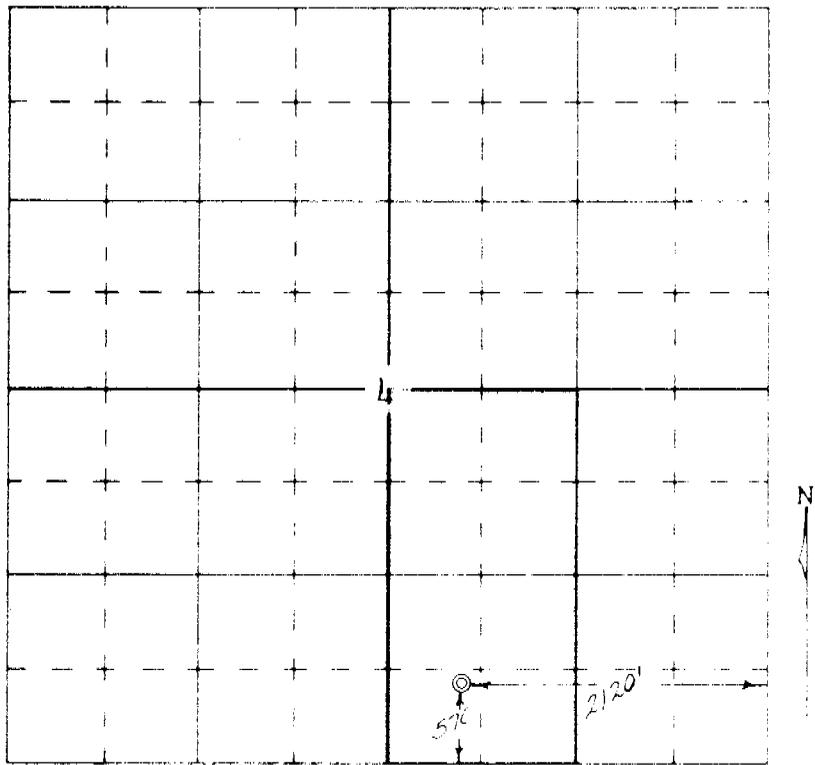
Well Name & No. _____ Lease No. _____

Location 570 feet from South line and 2120 feet from East line

Being in San Juan County, Utah

Sec. 4, T.41S., R.26E., S.L.M.

Ground Elevation 4835



Scale -- 4 inches equals 1 mile

Surveyed September 16, 19 66

This is to certify that the above plat was prepared from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

Seal:

[Handwritten Signature]
Registered Professional
Engineer and Land Surveyor.
Utah No. 2533

Farmington, ~~New~~ Mexico

November 8, 1960

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

Re: Well NO. Navajo Tribe 'AC' #12,
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.

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

This approval terminates within 90 days if the well has not been spudded-in within said period. Enclosed please find Form OGCC-8-X, which is to be completed whether or not water sands (aquifers) are encountered while drilling. Your cooperation with respect to completing this form will be greatly appreciated.

The API number assigned to this well is 43-037-20162 (see Bulletin D12 published by the American Petroleum Institute).

Very truly yours,

OIL & GAS CONSERVATION COMMISSION

CLEON B. FEIGHT
EXECUTIVE DIRECTOR

CBF:sc

cc: P. T. McGrath, District Engineer
U. S. Geological Survey
Box 959
Farmington, New Mexico

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1224

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.

12

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, GR, etc.)

4835' OR

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:

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 well 4:45 AM, 11-13-66.

Drilled 12-1/4" hole to 120' and reamed to 17-1/4". Cemented 108' of 13-3/8" casing at 115' with 100 sacks of regular cement with 2% calcium chloride added. Cement circulated. Tested casing with 1000 psi for 30 minutes. Casing tested okay.

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

SIGNED

[Signature]

TITLE

District Superintendent

DATE

12/2/66

(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 IN TRIPlicate*
(Other instructions on re-
verse side)

Form approved
Budget Bureau No. 42-R1434

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.

12

10. FIELD AND POOL, OR WILDCAT

MoElmo Mesa

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

4, T41S, R26E, SLM

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
TEXACO Inc.

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

570' from South line and 2120' from East line

14. PERMIT NO.

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

4835' GR

12. COUNTY OR PARISH 13. STATE

San Juan Utah

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.)*

Drilled 12-1/4" hole to 1610' and cemented 1598' of 8-5/8" casing at 1610' with 350 sacks of 50:50 Pozmix with 4% gel added followed by 50 sacks of regular neat cement with 2% calcium chloride added. Cement did not circulate. Squeezed through bradenhead with 100 sacks of regular neat cement with 2% calcium chloride added. Tested casing with 1,000 psi for 30 minutes. Tested okay.

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

SIGNED

[Signature]

TITLE

District Superintendent

DATE

12/2/66

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

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: "Sacks 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Shinarump	2726'		Core #1 5525' to 5585'. Recovered 16' anhydrite, 27½' dolomite, 9½' lime and 7' of dolomite and lime. Core #2 5585' to 5636'. Recovered 34½' micrite, 10' dolomite and 6½' lime.			
Organ Rock	2812'					
Honsker Trail	4592'					
Ismay	5518'					

JAN 25 1967

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 "AG" #12
Operator TEXACO Inc. Address Box 810 Farmington, New Mexico 505-325-7553
Contractor Mesa Drillers Address Box 108 87401 Lubbock, Texas Phone 744-1017
Location SW 1/4 SE 1/4 Sec. 4 T. 41 N. R. 26 E San Juan County, Utah.
S W

Water Sands:

<u>Depth</u>		<u>Volume</u>	<u>Quality</u>
From	To	Flow Rate or Head	Fresh or Salty
1. 957'		1 1/2" flow	sulphur
2. 1390'		2 1/2" flow	sulphur
3.			
4.			
5.			

(Continued on reverse side if necessary)

Formation Tops:

Shinarump	2725'	Honaker Trail	4592'
Organ Rock	2812'	Ismay	5518'

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-R1333

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.

12

10. FIELD AND POOL, OR WILDCAT

McElmo Mesa

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

4, T41S, R26E, S1M

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
570' from South line and 2120' from East line

14. PERMIT NO.

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

4854' 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:

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 5706'. PFTD 5680'.

Perforated 5-1/2" casing from 5626' to 5630' with 2 jet shots per foot. Set packer at 5581' and treated perforations 5626' to 5630' with 500 gallons of 15% NE-HCL acid. Formation broke at 4300 psi and injected one barrel per minute at 1200 psi. Instant shut in pressure 1700 psi, 15 minute shut in pressure 400 psi. Swabbed 35 barrels of acid and load water and 230 barrels of salt water. Pulled packer and perforated casing from 5560' to 5568', 5574' to 5586' and 5601' to 5609' with 2 jet shots per foot. Set retrievable bridge plug at 5616' and packer at 5594'. Attempted to treat perforations 5601' to 5609' and acid communicated to upper perforations at 3500 psi. Set packer at 5555' and treated perforations 5560' to 5609' with 2500 gallons of 15% NE-HCL acid. Treating pressure 4100 psi with an injection rate of 2 barrels per minute decreasing to 1 barrel per minute. Flushed with 2500 gallons of fresh water. Instant shut in pressure 3900 psi, 15 minute shut in pressure 2900 psi. Ran 2-1/2" tubing and set bridge plug at 5640' and packer at 5616'.

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

SIGNED

[Signature]

TITLE

District Superintendent

DATE

1/13/67

(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 THIS MANNER
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1434

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.

12

10. FIELD AND POOL, OR WILDCAT

McElmo Mesa

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

4, T418, R26E, S1M

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

570' from South Line and 2120' from East Line

14. PERMIT NO.

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

4854' DF

12. COUNTY OR PARISH 13. STATE

San Juan

Utah

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.)*

Drilled 7-5/8" hole to 5706' and cemented 5693' of 5-1/2" casing at 5706' with Lynes external packer set at 5613'. Cemented casing with 320 sacks of regular class A cement. Tested casing with 1500 psi for 30 minutes. Casing tested okay.

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

SIGNED

[Signature]

TITLE

District Superintendent

DATE

1/13/67

(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 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.

12

10. FIELD AND POOL, OR WILDCAT

McElmo Mesa

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

~~4, THIS WGS, 11M~~
San Juan 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

570' from South line and 2120' from East line

14. PERMIT NO.

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

4854' 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 5705'. PBTD 5680'.

This well was completed as an uneconomical well on 12/31/66, and put on test status. Well has been shut-in since completion of test period. There are no workover possibilities and the well is not needed for salt water disposal. We propose to plug and abandon as follows:

Fill hole with mud and spot 25 sack cement plug across perforations from 5560' to 5630'. Cut and pull 5 1/2" casing at 4200'. Spot 25 sack plug across casing stub at 4200', 75 sack plug from 2850' to 2950', 50 sack plug 2500' to 2600', 50 sack plug from 1600' to 1700' and 10 sack plug in top of hole. A 4" pipe marker will be cemented in top of hole with at least 4' extending above ground level.

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION

DATE June 19, 1968

BY *Paul A. Benckell*
Chief Petroleum Engineer

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

SIGNED *R. C. Hall* R. C. HALL

TITLE District Accountant

DATE June 14, 1968

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

1588 West North Temple
Salt Lake City, Utah 84116

328-5771
October 8, 1968

Texaco Inc.
Box 810
Farmington, New Mexico 87401

Re: Well No. Navajo Tribe AC #5,
Sec.33, T. 40 S., R. 26 E.,
Well No. Navajo Tribe AC #12,
Sec. 4, T. 41 S., R. 26 E.,
San Juan County, Utah.

Gentlemen:

This letter is to advise you that the Subsequent Report of Abandonment and Plugging of the above mentioned wells is due and has not been filed with this office as required by Rule D-2, General Rules and Regulations and Rules of Practice and Procedure, Utah State Division of Oil and Gas Conservation.

Thank you for your cooperation with respect to this matter.

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

SHARON CAMERON
RECORDS CLERK

sc



State of Utah
Department of Natural Resources
Division of Oil & Gas Conservation
1588 West North Temple
Salt Lake City, Utah 84116

Attention: Miss Sharon Cameron, Records Clerk

Gentlemen:

Please refer to your letter of October 8, 1968,
concerning the plugging reports for the subject wells.

To date these wells have not been plugged. We
plan to complete this work in the very near future and
will file the necessary reports just as soon as the wells
are plugged.

Yours very truly,

C. P. Farmer
District Superintendent

FEBR-LC

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

SUBMIT IN TRIPPLICATE*
(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

Nava jo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribe "AC"

9. WELL NO.

12

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
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

570 FSL, 2120' FEL

14. PERMIT NO.

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

4854' 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.)*

**TD 5706', PSTD 5680'.
Moved in and rigged up pulling unit 11-9-68. Pulled BP, packer and collar locator. Spotted 25 sacks cement plug across perf. 5560' to 5630'. Filled hole w/mud and removed tubing head. Worked 5 1/2" casing loose, cut and pulled from 2476'. Spotted 75 sack plug across casing stub from 2476' to 2376', 50 sack plug from 1600' to 1700', and 10 sack plug in top of hole. Placed 4" pipe marker @ surface. Work completed 11-21-68.**

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

SIGNED

G. L. Eaton

TITLE

District Superintendent

DATE

3/21/69

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

USGS(3)-OGCC(2)-Navajo Tribe-HHB-File