

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form Approved
GSA GEN. REG. NO. 42-R142
5. LEASE OR WELL NUMBER AND SERIAL NO.

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.)

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6. IF IS AN ADJUTANT OR TRIBE NAME

1.

OIL WELL ☐ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

1200 Lincoln Tower Bldg., Denver, Colorado 80203

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

14. PERMIT NO.

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

18.

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) Shut-In

REPAIRING WELL

ALTERING CASING

ABANDONMENT

(NOTE: Report results of multiple completion or Well Completion or Recompletion Report and Log (C-1))

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 washers and zones pertinent to this work.) *

STATUS OF WELL:

ACTIVE INJECTION

APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED:

NA

REASON FOR TEMP ABAND:

NA

FUTURE PLANS FOR WELL:

NA

APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING:

NA

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

SIGNED

D. W. Myers

TITLE

Division Production Manager

DATE

December 13, 1974

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

