

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)NOTE: APPROVED  
BUREAU OF LANDS No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

6. 40 ACRES, ALLOTMENT OR TRACT NAME

## 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.)

7. UNIT ASSIGNMENT NAME

LONE PINE DAKOTA D

8. NAME OF LESSEE

LONE PINE DAKOTA D

9. WELL NO.

4

10. FIELD AND ZONE, OR WILDCAT

Lone Pine Dakota D

11. SEC. 36, T. 17 N., R. 23 W.

K-9 17 8

SEC 36, T. 17 N., R. 23 W.

12. COUNTY OF FILLMORE, 13. STATE

McKinley N.M.

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

1710 FSL - 2310 FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, RT, CR, etc.)

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 COMPLETS

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 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.)\*

STATUS OF WELL: SHUT-IN

APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED: 7/71

REASON FOR TEMP ABAND: GASED OUT

FUTURE PLANS FOR WELL: MAY HAVE USE AS GAS PRODUCER

APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING: NONE

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

SIGNED

D.A. Myers

TITLE

Division Production Manager

DATE

December 13, 1971

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: