

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
14-20-0603-9877

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
Tenneco Oil Company

3. ADDRESS OF OPERATOR
1860 Lincoln St., Suite 1200, Denver, Colorado 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1365 FNL and 2621 FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
7008 GL

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo

7. UNIT AGREEMENT NAME
Lone Pine Dakota "D"

8. FARM OR LEASE NAME

9. WELL NO.
30

10. FIELD AND POOL, OR WILDCAT
Lone Pine Dakota "D"

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 18, T17N, R8W

12. COUNTY OR PARISH
McKinley

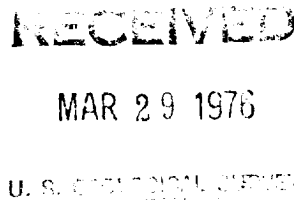
13. STATE
New Mexico

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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<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.)*

3/16/76 MIRU Completion Unit. Cleaned out to PBTD 2845'.
3/17/76 Ran GR-correlation log. Perf'd Dakota 2789-2793 and 2796-2800 w/2JSPF.
Acidized w/500 gal. 15% HCL.
AIR: 1 bpm @ 500 psi.
3/18-3/20/76 Swab testing. Recovering water only.
3/21/76 Shut in pending further evaluation.



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

SIGNED [Signature] TITLE Div. General Manager DATE 3-25-76

(This space for Federal or State office use)

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