

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R

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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR
Tenneco Oil Company

3. ADDRESS OF OPERATOR
P.O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1646' FNL 2667' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:
TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF

☐
☐
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☐
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☐

RECEIVED

NOV 1980

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6995' gr.

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all 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.)
10/2/80

MIRUSU. NUBOP. RIH w/bit, DC's & 2-7/8" tbg. Tag PBD @ 1663', PT csg. to 1000 psi. OK. POOH w/bit & tbg. RIH w/4" csg. gun. Perf'd Lower Hospah (4 JSPI) 120' squeeze phasing from 1624-36'. RIH w/8-5/8" Baker wash tool and tbg. Acidize perfs w/1 bbl/ft. 7-1/2% MSR acid. POOH w/2-7/8" tbg. changing beveled collars. RIH w/2-3/4" tbg. pump, gas anchor & 2-7/8" tbg. Land w/pump @ perfs 1624-36'. RIH w/2-3/8" tbg. w/SN 1 jt. off bottom & land @ 1570', NUWH & run rods in 2-7/8" tbg. & ON/OFF tool, RDMOSU.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Carol J. Miller TITLE Asst Div Adm Mgr DATE 10/14/80 Set @ _____ Ft.

APPROVED BY _____ (This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY: _____

TITLE _____

DATE _____

NMOCC

*See Instructions on Reverse Side

BW