

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> P & A - Dry Hole		5. LEASE DESIGNATION AND SERIAL NO. Contract #420
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla
3. ADDRESS OF OPERATOR Suite 1200 Lincoln Tower Bldg., -Denver, Colorado 80203		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' F/WL and 660' F/SL		8. FARM OR LEASE NAME Parlay "A"
14. PERMIT NO.		9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7127 GR		10. FIELD AND POOL, OR WILDCAT Parlay U.S. Mesaverde Est
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 29, T-22-N, R-3-W
		12. COUNTY OR PARISH San doval
		13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" 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.)\*

P & A  
Well ~~3-25-72~~ 3-25-72 as follows:

DEPTH		NO. SACS CEMENT
FROM	TO	
3650'	3800'	50
2150'	2300'	55
1750'	2050'	50

1 1/2 in and 1/2 out of 8-5/8" surface casing @ 135'.  
1/2 in casing in top at surface.

Installed dry hole marker and cleaned location.

(Location cleaned 4-24-72)



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

SIGNED G. A. Ford

TITLE Sr. Production Clerk

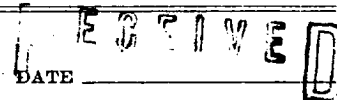
DATE 4-25-72

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_



\*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY  
DURANGO, COLO.