

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse 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 checked="" type="checkbox"/> OTHER   |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>Jicarilla Contract 110              |
| 2. NAME OF OPERATOR<br>Tenneco Oil Company  |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br>Jicarilla Dulce, N.M.              |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1714 - Durango, Colorado  |  | 7. UNIT AGREEMENT NAME   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>1850' FSL, 1850' FWL |  | 8. FARM OR LEASE NAME<br>Jicarilla "A"                                     |
| 14. PERMIT NO.  |  | 9. WELL NO.<br>#14   |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>6633' GR  |  | 10. FIELD AND POOL, OR WILDCAT<br>Basin Dakota                             |
|   |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 19, T-26-N, R-5-W |
|   |  | 12. COUNTY OR PARISH<br>Rio Arriba   |
|   |  | 13. STATE<br>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"/>             |   |

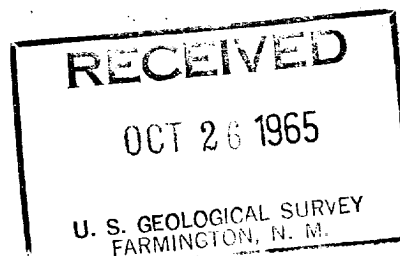
## SUBSEQUENT REPORT OF:

|  |  |
|--|--|
| WATER SHUT-OFF <input checked="" 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 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.)\*

Rig up, spud 9-22-65, drill to 467: Ran 14 joints 8-5/8" 24# J-55 casing set at 434' with 250 sacks cement. Wait on cement. Drill cement and drill to TD 7585' on 10-15-65. Logged. Ran 237 joints 4-1/2" 11.6# and 10.5# J-55 casing set at 7584' with 300 sacks cement on first stage. Second stage with 310 sacks, good circulation. Wait on cement. Cemented third stage with 570 sacks cement. Wait on cement. Released rig 10-15-65. Waiting on completion rig.



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

SIGNED

*Harold C. Nichols*  
Harold C. Nichols

TITLE

Senior Production Clerk

DATE October 22, 1965

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side