

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(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. Jicarilla Cont 109
2. NAME OF OPERATOR Tenneco Oil Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Dulce N.M.
3. ADDRESS OF OPERATOR P. O. Box 1714, Durango, Colorado	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 790 FNL 2510 FEL Unit B	8. FARM OR LEASE NAME Jicarilla "B"
	9. WELL NO. 8
	10. FIELD AND POOL, OR WILDCAT Basin Dakota
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15, T26N - R5W
14. PERMIT NO.	12. COUNTY OR PARISH Rio Arriba
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6664 Gr.	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:

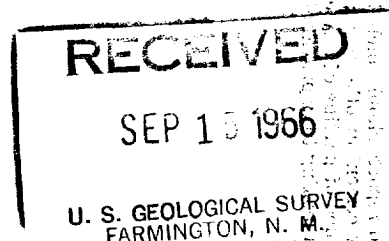
WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)*

Spud 8/18/66, drilled to 329'. Ran 8 jts. 20 and 24# 8 5/8" J-55 casing set at 329 with 175 sx cement. Cement circulated. WOC. Drilled to TD 7734 on 9/3/66. Logged. Ran 4 1/2" casing 10.5 and 11.6# set at 7731 with 770 sx cement. Cement circulated. Stage collars set at 5763 and 3401. WOC.

Released rig 9/3/66. Waiting on completion.



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

SIGNED Harold C. Nichols TITLE Senior Production Clerk

DATE 9/14/66

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

DISTRIBUTION:

5-USGS, 1-Continental, 1-Atlantic, 1-File

*See Instructions on Reverse Side