

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT 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 1850 FNL 1150 FEL Unit H	8. FARM OR LEASE NAME Jicarilla B
14. PERMIT NO.	9. WELL NO. 7
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6610 Gr.	10. FIELD AND POOL, OR WILDCAT Basin Dakota
	11. SEC., T., R., OR BLK. AND SURVEY OR AREA Sec. 16, T. 26 N., R. 5 W.
	12. COUNTY OR PARISH Rio Arriba
	13. STATE New Mexico

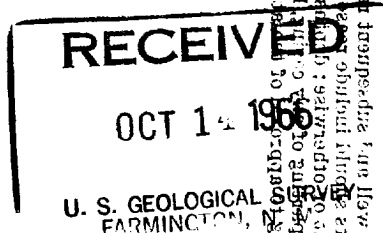
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)*

Rigged up completion unit 9/25/66. CO to TD. PBTD 7633. Perf. 7580-7480 w/ 1 HPF, 28 holes. Acidized w/1500 gals. acid. Frac w/75,000# sand and 75,000 gals. water. Set BP at 7420. Perf. 7376-84 w/1HPF, 7349-7354 w/4HPF, 28 holes. Frac w/45,000# sand and 45,000 gals. water. CO to 7616. Ran 240 fts. 2 3/8" EUE tubing set at 7563'. Installed tree.

Released rig 9/27/66. WO test.



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

SIGNED

Harold C. Nichols

TITLE Senior Production Clerk

DATE 10/13/66

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

DISTRIBUTION:

6-USGS

1-Atlantic

1-Continental

1-File

*See Instructions on Reverse Side