

DEPARTMENT OF THE INTERIOR (Form 200)  
GEOLOGICAL SURVEY

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.)

5. LEASE DESIGNATION AND SERIAL NO.  
JICARILLA CONT 108  
6. IF INDIAN, ALLOTTEL OR TRIBE NAME  
JICARILLA  
7. UNIT AGREEMENT NAME  
JICARILLA C  
8. FARM OR LEASE NAME  
JICARILLA C  
9. WELL NO.  
4  
10. FIELD AND POOL, OR WILDCAT  
Blanco Mesa Verde  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 24, T26N, R5W  
12. COUNTY OR PARISH  
San Juan  
13. STATE  
NM

1.  OIL WELL  GAS WELL  OTHER  
2. NAME OF OPERATOR  
Tenneco Oil Company  
3. ADDRESS OF OPERATOR  
720 So. Colorado Blvd., Denver, Colorado 80222  
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface 1650 ' FNL and 1650 'FWL, Unit  
14. PERMIT NO.  
15. ELEVATIONS (Show whether DF, RT, CK, etc.)  
6608 GR

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"/>	FULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Commingle</u>	<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.)\*

- 9-5-78 As Per NMOCC Order No. 5707
1. RIH & PULLED SEPARATION SLEEVE @6708'.
  2. JARRED OPEN SLIDING SLEEVE
  3. SWABBED WELL

Production before work: 207 MCFPD  
Production after work: 430 MCFPD

18. I hereby certify that the foregoing is true and correct.  
SIGNED Curley Matthews TITLE: Administrative Supervisor DATE 10/10/78  
(This space for Federal or State office use)

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

RECEIVED  
OCT 20 1978

RECEIVED  
OCT 18 1978

\*See Instructions on Reverse Side