Form 9-331 Dec. 1973	Form Approved.	
UNITED STATES	Budget Bureau No. 42-R1424	
DEPARTMENT OF THE INTERIOR	Jicarilla Cont 108	
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
deducations conver	Jicarilla S S S	
SUNDRY NOTICES AND REPORTS ON WELLS	7 HART AGENCE TO THE TOTAL OF T	
(Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT NAME: 5 John St. 19 John	
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME S 2.3 E	
1. oil gas X other		
Well - Well States	9. WELL NO.	
2. NAME OF OPERATOR	4 37 50 37 39 20	
Tenneco Oil Company	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR	Blanco Mesa Verde - Basin Dako	ota
720 S, Colorado Blvd., Denver, CO 80222 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
helow)	Sec. 24,5 1-26-N, R-554 \$	
AT SURFACE: 1650' FNL and 1650' FWL	12. COUNTY OR PARISH 13" STATE" 5	
AT TOP PROD. INTERVAL:	Rio Arriba है New Mexico	
AT TOTAL DEPTH:	14. API NO. Burno be suited to	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF KDB AND WD)	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	0000 dr 2 8 7 8 8 5 4 5 5	
TEST WATER SHUT-OFF	ings Lieft va Fango Abio Marka Ma Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Ma Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Marka Ma Ma Marka Ma Marka Marka Marka Marka Marka Ma Marka Marka Marka Ma Ma Ma Marka Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma	
FRACTURE TREAT	o top envir envir envir echie copie copie copie	
SHOOT OR ACIDIZE		
REPAIR WELL	(NOTE: Report results of multiple completion or zone	
MULTIPLE COMPLETE	change on Form 9–330.05 in addition of the control	
CHANGE ZONES	oils table tab table tab tab table tab tab tab tab tab tab tab tab tab tab	
ABANDON*	Cruckie In appeting on a property of the cruckies of the cruc	
(other) Committing Te X	Janoilburteni Januage illow Janua ant ha Janua ant ha Janua institut Janua instit	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state	e all pertinent details and give pertinent dates	
including estimated date of starting any proposed work. If well is di measured and true vertical depths for all markers and zones pertinen	irectionally drilled, give subsurface locations and	
To update information not contained in subse	equent report of comming ខ្មែរ	
approved 10/18/78:	1 by	
1) Cookbad coll from 7/21/70 to 0/2/70	od ela grouta u estr u estr esol (carosa est (en est (en	
1) Swabbed well from 7/21/78 to 8/2/78	d albecke griotelinge griotelinge grioteline e.ol (ame e.ol (ame ode) nobe ode) almol oneds ent	
2) Well back on production 8/2/78		
2) Well back on production of 2,770	### #################################	
		•
	t location by the state of the	
Cultivide as Safety Valvas Manus and Type		
Subsurface Safety Valve: Manu. and Type	Ft.	
18. I hereby certify that the foregoing is true and correct		
SIGNED alle) alke TITLE Admin. Supervis	SOT DATE	
(This space for Federal or State offi	ice use)	

*See Instructions on Reverse Side