

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

OTHER INSTRUCTIONS ON THE
REVERSE SIDE

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 ☐ GAS WELL ☒ OTHER	5. LEASE DESIGNATION AND SERIAL NO. 09-000110
2. NAME OF OPERATOR Tenneco Oil Company	6. INDIAN, ALLEGED OR TRIBE NAME Jicarilla, Dulce N.M.
3. ADDRESS OF OPERATOR 720 So. Colorado Blvd., Denver, Colorado 80222	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 835' FWL and 980' FNL, Unit	8. FARM OR LEASE NAME Jicarilla "A"
	9. WELL NO. 9
	10. FIELD AND TOOL, OR WILDCAT Tapacito Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20 T26N, R5W
14. PERMIT NO.	13. STATE NM
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 6,695 GR	12. COUNTY OR PARISH Rio Arriba

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

NOTICE OF INTENTION TO:		SURSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☒
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETE	☐	ALTERING CASING	☐
ABANDON*	☐	ABANDONMENT*	☐
CHANGE PLANS	☐		

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.)

SPUDDED 12 3/4" HOLE @ 12:01 AM ON 9/28/78. DRILD TO 276'. RAN 8 JTS OF 8 5/8" 32# CSG. SET @276'. CMTD W/225 SX. PD @ 9:00 AM 9/28/78. WOC 12 HRS. TEST TO 600 PSI FOR 30 MIN. HELD OK. CIRC CMT.



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

SIGNED

Conley Matthews

TITLE: Administrative Supervisor

DATE

10/17/78

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNITED STATES
DEPARTMENT OF THE INTERIOR
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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR
Tenneco Oil Company

3. ADDRESS OF OPERATOR
720 So. Colo. Blvd., Denver, Colo. 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 835' FWL & 980' FNL, Unit D
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☒
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

This well did not respond to fracture treatment, due to severe plugging around the wellbore & along the fracture. We propose to acidize as follows: MIRUPU. Install BOE. RIH w/4 1/2" 10.5# pkr and set @ 6600'. Install Blooie line to pit. Acidize w/30,000 SCF N2 PAD, 1500 gal 50% Quality Foamed Acid 6 bpm @ 3700#, 835 gal 85% Quality Foamed Acid 4 bpm @ 3700#, 1500 gal 50% - 835 gal 85% - 1500 gal 50% Quality Foamed Acid. Flush w/Dry N2. Total of 6170 gal Foamed Acid comprised of: 15% MCA-2500 gal, 30000 SCF N2 PAD, 115,000 SCF N2 in Acid, 80000 SCF Flush. Unseat pkr NDBOE. RDPU, and place well on production.

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft.

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

SIGNED Carley Statton TITLE Admin. Supervisor DATE 4/1/91/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount; size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

GPO : 1975 O - 214-149