

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF-080373

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hanson

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 6, T25N, R10W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

1. OIL ☐ GAS ☒ OTHER ☐  
WELL WELL
2. NAME OF OPERATOR  
Tenneco Oil Company
3. ADDRESS OF OPERATOR  
1860 Lincoln St., Suite 1200, Denver, Colorado 80203
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

950' FNL and 1800' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

6542' GR

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐FRACTURE TREAT ☐MULTIPLE COMPLETE ☐SHOOT OR ACIDIZE ☐ABANDON\* ☐REPAIR WELL ☐CHANGE PLANS ☐(Other) ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐REPAIRING WELL ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOTING OR ACIDIZING ☐ABANDONMENT\* ☐(Other) ☐(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.)\*

Status of Well: Shut-in gas well - No market

Approximate Date that Temp. Aband. Commenced:

Reason for Temp. Aband.:

Future Plans for Well: Secure market &amp; produce

Approximate Date of Future W.O. or Plugging:

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

SIGNED

*D. L. Myers*

TITLE Div. Production Manager

DATE 10-21-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side