

**DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

(Other instructions on reverse side)

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.)

<b>1. OIL WELL</b> <input type="checkbox"/> <b>GAS WELL</b> <input checked="" type="checkbox"/> <b>OTHER</b> <input type="checkbox"/> <b>2. NAME OF OPERATOR</b> Tenneco Oil Company <b>3. ADDRESS OF OPERATOR</b> 1860 Lincoln St., Suite 1200, Denver, Colorado 80203 <b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <p align="center">1650' FNL and 2508' FEL</p>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b> N00-C-14-20-3616 <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b> Navajo <b>7. UNIT AGREEMENT NAME</b>  <b>8. FARM OR LEASE NAME</b> Canyon <b>9. WELL NO.</b> 8 <b>10. FIELD AND POOL, OR WILDCAT</b> Basin Dakota <b>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> Sec. 14, T25N, R11W <b>12. COUNTY OR PARISH</b> <b>13. STATE</b> San Juan New Mexico
<b>14. PERMIT NO.</b>	<b>15. ELEVATIONS</b> (Show whether DF, RT, GR, etc.) <p align="center">6100' GR</p>	

**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 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) <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.)\*

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 & produce

Approximate Date of Future W.O. or Plugging:

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

SIGNED <u>A.A. Myer</u>	TITLE <u>Div. Production Manager</u>	DATE <u>10-21-25</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

\*See Instructions on Reverse Side