

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Cont. 14-20-603-1433
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALL INDIAN OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR Suite 1200 Lincoln Tower Bldg., Denver, Colorado 80203		7. UNIT AGREEMENT NAME Canyon
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 790' FSL and 1450' FEL		8. FARM OR LEASE NAME Canyon
14. PERMIT NO.		9. WELL NO. 7
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6413.0' GR		10. FIELD AND POOL, OR WILDCAT Basin Dakota
		11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA Sec. 15 T 25N R 11W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

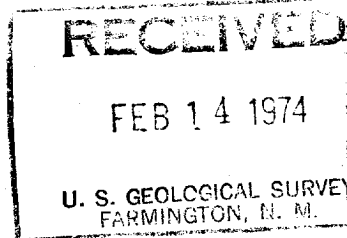
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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 checked="" type="checkbox"/>	ALTERING CASINGS <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(NOTE: Report results of multiple completion or 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.) \*

Moved in completion unit 2/5/74. Cleaned out hole to P.B.T.D. 5930' Tested casing to 1400 p.s.i.-held o.k.. Ran 180 jts. 2-7/8" 6.5# J-55 EUE tubing landing at 5665'. Perforated 5809'-5820' and 5789'-5800' with 2 JSPF Fracture treated in 6 equal stages with 2000 Gal. condensate, 5000 Gals. gelled condensate with 2#/Gal 20/40 sand & 1000 Gal. gelled condensate spacer, last stage contained 10/20 sand. Flowed well to clean up. Well shut in pending further testing



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

SIGNED James W. Mole TITLE Production Clerk DATE 2/12/74

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: