

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN REPLICATION  
(Other Instructions on re-  
verse side)

Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

N00-C-14-20-5252

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Canyon

9. WELL NO.

17

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

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

Sec. 25, T25N, R11W

12. COUNTY OR PARISH

San Juan

13. STATE

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

800' FNL and 800' FEL

14. PERMIT NO.

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

6608' GR

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

## NOTICE OF INTENTION TO:

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

## SUBSEQUENT REPORT OF:

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

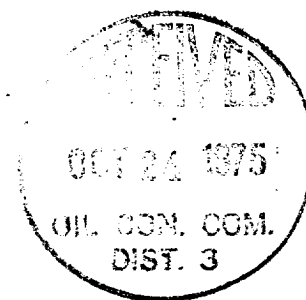
Status of Well: SI gas well - No market

Approximate Date that Temp. Aband. Commenced:

Reason for Temp. Aband.:

Future Plans for Well: Secure market and produce

Approximate Date of Future W.O. or Plugging:



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

SIGNED

*D. D. 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