

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  
Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1340' FSL, 1230' FWL  
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

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**RECEIVED**  
JUL 7 1983

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

5. LEASE  
SF-078390

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Price Com

9. WELL NO.  
5E

10. FIELD OR WILDCAT NAME  
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 11, T28N, R8W

12. COUNTY OR PARISH  
San Juan

13. STATE  
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5932' GR

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.)\*

6/28/83: Pt csg to 3500 psi. OK. Circ hole w/1% KCL. Spot 500 gal 7-1/2% Double-Inhibited HCL @ 6945'.

6/29/83: Perf Dakota w/1 JSPF 6748-60', 6841-52', 6882-90', w/2 JSPF 6938-42', 6960-70', total of 45', 59 holes. Acidized & balled off w/1100. 15% WT HCL acid & 87 1.1 SG ball slrs. Frac well w/78,000 gal. 30# X-L gel & 156,000# of 20/40 sd.

6/30/83: Tbg landed @ 6819'. ND BOP. BUWH. RDMOSU.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED John Orr TITLE Production Analyst DATE 7/5/83

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: **ACCEPTED FOR RECORD**

JUL 14 1983

\*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY San

NMOCC