DEPARTMENT OF THE INTERIOR verse side) UNITED STATES

SUBMIT IN TRIPLICATES (Other instructions on re-

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

SF 077085 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

| GEOLO | GICAL | SURVEY | |
|-------|-------|---------|-------|
| | | DEDORTS | WELLS |

| SUNDRY NOTICES AND KET ONTO (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. | 7. UNIT AGREEMENT NAME |
|---|---|
| 1. OIL GAS X OTHER WELL WELL X | 8. FARM OR LEASE NAME Omler "A" |
| 2. NAME OF OPERATOR Tenneco Oil Company | 9. WELL NO. |
| 3. ADDRESS OF OPERATOR BOX 1714, Durango, Colorado 4. Location of Well (Report location clearly and in accordance with any State requirements.* | 10. FIELD AND POOL, OR WILDCAT Basin Dakota |
| 4. LOCATION OF WELL (REPORT ROCATION COMP.) See also space 17 below.) At surface | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA |
| 1650' FEI, 1650' FNL | Sec. 26, T28N, R10W |

1650' FEL 1650' FNL

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. 5760 GR

12. COUNTY OR PARISH 18. STATE Mex.

San Juan

16.

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

| Check Appropriate box to indicate the | | SUBSEQUENT REPORT OF: | |
|---|---|--|--|
| NOTICE TEST WATER SHUT-OFF FRACTURE TREAT | OF INTENTION TO: PULL OR ALTER CASING MULTIPLE COMPLETE | WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING X | REPAIRING WELL ALTERING CASING ABANDONMENT* |
| SHOOT OR ACIDIZE REPAIR WELL | ABANDON* CHANGE PLANS | (Other) (Note: Report results of multip Completion or Recompletion Report results and cive pertinent dates, including | te completion on Well ort and Log form.) restimated date of starti |

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.) *

Rig up completion rig 7-4-65. 6480 PBTD. Cleaned out to 6480. Tested casing to 4000#, held okay. Spotted 250 gal acid on bottom. Logged. Perf 6396-6346. Frac Perfs w/40,000 gal. water and 40,000 lbs. sand. Cleaned out to 6450 spotted 500 gal acid. Pulled out of hole, frac w/40,000 gals. water and 20,000 lbs. sand and cleaned out to 6400. Swabbed in well. Rig released 7-6-65. Installed tree. Job complete.

JUL 23 1965

U. S. GEOLOGICAL SURVEY

| 18. I hereby certify that the foregoing is true and correct | TITLE District Office Supv. | DATE 7-21-65 |
|---|-----------------------------|--------------|
| (This space for Federal or State office use) | TITLE | DATE |
| APPROVED BY | TITLE | |