DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)
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 "APPLICATION FOR PERMIT--" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.
SF 078596-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1.
OIL WELL ☐   GAS WELL ☒   OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
Tenneco Oil Company

8. FARM OR LEASE NAME
Florance

3. ADDRESS OF OPERATOR
1860 Lincoln St., Suite 1200, Denver, Colorado   80295

9. WELL NO.
28A

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1535' FNL and 808' FWL
Unit E

10. FIELD AND POOL, OR WILDCAT
Blanco Mesa Verde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 3 , T29N, R8W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6293' GL

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	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☒	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☒	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other)			
(Other)							

(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.) *

12/21-12/23/76 MIRUCU Perf'd 16 holes from 5368'-5190'. Broke down and sand/water
frac'd formation w/80,000#s of 20/40 Mesh sand. Perf'd 19 holes from 4646'-5113'.
Broke down and sand water, frac'd formation w/90,000 #s of 20/40 mesh sand
Status of well = SI for AOF test.

OIL CON COM DIST. 3

JAN 3 1977

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

SIGNED   TITLE Div. Production Manager   DATE

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side