

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

(Other instructions on reverse side)

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.)

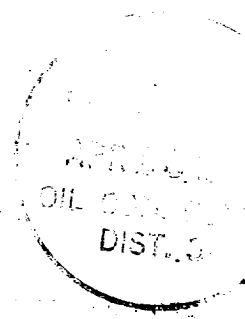
1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF 078415
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 720 So. Colorado Blvd., Denver, Colorado 80222		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2115' FNL and 1790' FWL, Unit F		8. FARM OR LEASE NAME ROELOFS
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 6422' GL		10. FIELD AND POOL, OR WILDCAT Basin DAKOTA
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC 15, T29N, R8W
		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	☐	WATER SHUT-OFF	☒
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETE	☐	ALTERING CASING	☐
ABANDON*	☐	ABANDONMENT*	☐
CHANGE PLANS	☐		

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.)*

3/20/78 WOC FOR SURFACE PIPE 8 HRS. TESTED TO 600 PSI. HELD OK.
to DRL'D 8 3/4" HOLE TO 3409'. RAN 78 JTS 7:, 23# CSG. SET
3/22/78 @ 3409'. CMT'D W/ 410 SX, FOLLOWED W/ 125 SX CL B W/ 3% CACL. PD 11:45 AM
3/22/78. WOC 18 HRS. TESTED TO 1000 PSI. HELD OK.



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

SIGNED ALL Myers TITLE Div. Production Manager DATE 4/2/78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: