Form 9-331
(May 1963)

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 078415
6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
7. UNIT AGREEMENT NAME:
8. FARM OR LEASE NAME: ROELOFS
9. WELL NO.: 1
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

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR: Tenneco Oil Company

3. ADDRESS OF OPERATOR: 720 So. Colorado Blvd., Denver, Colorado 80222

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

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 6422' GL

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.)*

3/20/78 to 3/22/78 WOC FOR SURFACE PIPE 8 HRS. TESTED TO 600 PSI. HELD OK. DRL'D 8 3/4" HOLE TO 3409'. RAN 78 JTS 7:, 23# CSG. SET @ 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.

APR 1978
OIL CON. COM.
DIST. 3

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

SIGNED D.A. Magee TITLE Div. Production Manager DATE 4/21/78

(This space for Federal or State office use)

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

*See Instructions on Reverse Side