

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
720 S. Colorado Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2400' FNL & 1560' FEL, Unit G
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Change Drilling Program

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.)*

We propose to drill using the following parameters

- 1) Drill 13 3/4" hole to + 300'
- 2) Run 9 5/8", 36#, K-55 csg and cement with sufficient cement to circulate
- 3) Drill 8 3/4" hole to + 3500'
- 4) Run 7", 23#, K-55 csg and cement with sufficient cement to circulate to surface
- 5) Drill 6 1/2" hole to T.D. @7675' with gas
- 6) Log well
- 7) Run 4 1/2", 10.5#, K-55 csg to T.D. and 1 stage cement above Mesa Verde zone.

Subsurface Safety Valve: Manu. and Type

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

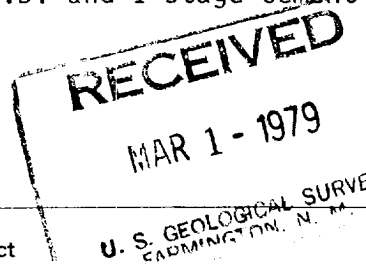
SIGNED Carley P. Hines TITLE Administrative Supervisor

(This space for Federal or State office use)

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

5. LEASE USA - SF - 078415	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Roelofs	
9. WELL NO. 3	
10. FIELD OR WILDCAT NAME Basin Dakota	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 9, T-29-N, R-8-W	
12. COUNTY OR PARISH San Juan	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 6463 GL	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)



Set @ _____ Ft.

NMOCC