UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	5. LEASE USA-SF-078502 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a differeservoir. Use Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME
4 :	Vandewart B
1. Oil gas well other 2. NAME OF OPERATOR	9. WELL NO.
Tenneco Oil Company	10. FIELD OR WILDCAT NAME Basin Dakota
3. ADDRESS OF OPERATOR 720 So. Colo. Blvd., Denver, Co. 80222	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space	AREA Sec. 24, T-29-N, R-8-W
AT SURFACE: 1620' FSL & 1650' FEL, Unit J	12. COUNTY OR PARISH 13. STATE San Juan New Mexico
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	14. API NO. 3 25 3 4 8 4 2 5
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOT REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6679
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF	
TEST WATER SHUT-OFF	
SHOOT OR ACIDIZE	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
MULTIPLE COMPLETE	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
CHANGE ZONES	
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.)* 7/13/79 - 7/24/79 MIRUSU. NUBOE. RIH w/pkr & set @ 5102'. Pumped into leak @ 3½ bpm - 1000 psi RIH w/cement retainer & set @ 4591'. Squeezed w/100 Sx class "B" neat cement. W0C 4 hrs. Did not get squeeze. Squeezed leak w/100 Sx class "B" neat cement. W0C 12 hrs. Pressure tstd csg to 2700 psi - didn't hold. Squeeze #3 100 Sx class "B" cement @ 3 3/4 bpm - 1800 psi. Pressure tstd tbg to 1450 psi for 15 min - didn't hold. Perforated @ 5105' w/2 JS, squeeze #4 w/100 Sx cement @ 3600 psi. W0C 12 hrs. Pressure tstd csg to 3500 psi - held ok. Preparing to perforate formation. Subsurface Safety Valve: Manu. and Type	
SIGNED LANGEY MUSTULE Admin. Supervisor DATE 1257	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
NMOC	C AUG TO STORY

*See Instructions on Reverse Side