

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

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 ☐ gas ☒ other

2. NAME OF OPERATOR
Tenneco Oil Company (303) 740-2584

3. ADDRESS OF OPERATOR
P.O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1510' FNL, 1685' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

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

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE
SF - 078502

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Vandewart

9. WELL NO.
2E

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 13, T29N, R8W

12. COUNTY OR PARISH
San Juan

13. STATE
NM

14. API NO.
30-045-25179

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6346' GR

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

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.)*

09/20/83: Drill to PBTD @7570'. PT to 1000 PSI, O.K.

09/21/83: RIH w/ 2 3/8" tbg. PT csg to 3500 psi, O.K. Spot 500 gal 7 1/2% HCL @ 7458'. PERF Dakota w/2 JSPF 7327-46', 7423-26' 7450-58' (30', 60 holes) Acidize w/1200 gal 15% WGTD HCL Frac well w/78000 gal 30# X-L gel & 165000# 20/40 sd.

09/22/83: Land tbg @ 7330'. RDMOSU

RECEIVED

001-111

OIL COMPANY

Set @ _____ Ft.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED [Signature] TITLE Production Analyst DATE 9/26/83

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

ACCEPTED FOR RECORD

SEP 30 1983

*See Instructions on Reverse Side

1000

FARMINGTON RESOURCE AREA

BY Smn