

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 well <input type="checkbox"/> gas well <input checked="" type="checkbox"/> other
2. NAME OF OPERATOR Tenneco Oil Company
3. ADDRESS OF OPERATOR Box 3249, Englewood, CO 80155
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1030' FSL, 1720' FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

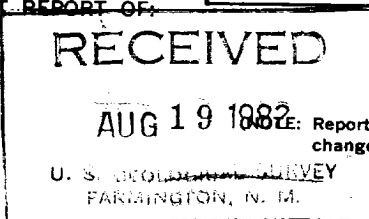
5. LEASE SF-078049
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Hughes A
9. WELL NO. 2E
10. FIELD OR WILDCAT NAME Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T29N, R8W
12. COUNTY OR PARISH San Juan
13. STATE New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD) 6671' GR

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:

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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.)*

7/26/82 - MIRURT. Spud well @ 1:30 p.m. 7/26/82, drill to 286', circ 15 mins., survey, TOOH. Run 6 jts 9-5/8" csg (253.12') 36# K-55 ST&C. Land @ 268' KB. Cmt'd w/235 sxs CL-B w/2% CACL2 and 1/4#/sx flocele. Plug down @ 8:05 pm 7/26/82. Circ 10 bbls cmt WOC 6 hrs. NUBOP's Test to 1,000 psi 30 min, OK.

7/29/82 - TIH w/bit #4, hit bridge @ 3,333', broke circ w/50% rtn. Pull 35 stds. Wash back w/20% LCM. Full rtns. after losing 500 bbls mud. Plugged bit.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Dennis Wilson TITLE Production Analyst DATE August 4, 1982

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

AUG 21 1982

*See Instructions on Reverse Side

NMOCC

FARMINGTON, N. M.
BY Sam