

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
P.O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 910' FSL 960' 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) Progress Report

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.)*

10/14/83: SPUD @ 2 PM 10-14-83. Drill 12 1/4 hole. Run 7 jts, 9 5/8 36# K-55 ST&C csg set @301. Cmt w/225 sx (265 cf) CL-B +2% CaCl₂. Circ 10 bbls to surface. NUBOPE & test to 1000 psi, 30 min, OK.

10/16/83: TD 8 3/4" hole.

10/17/83: Run 82 jts 7" 23# K-55 ST&C csg (3655') set @ 3650, DV @ 2217. Cmt 1st stage w/25 sx (30 cf) 65:35 lite + 1/4#/sx D-29 + 6% D-20+2% CaCl₂ + 2#/sx Perlite, tail w/184 sx (217 cf) CL-B +2% CaCl₂ + 1/4#/sx D-29. PD @ 3:30 PM 10-17-83. No cmt circ. Cmt 2nd stage w/249 sx (458 cf) 65:35 lite + 1/4#/sx D-29 + 6% D-20 2% CaCl₂. Tail w/50 sx CL-B (59 cf) + 1/4#/sx D-29 +2% CaCl₂ PD @ 6 PM 10-17-83 circ 5 bbls cmt. NUBOPE. Test to 1500 psi, 30 min OK. Drill DV & Test to 1500 psi, 30 min OK.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Production Analyst DATE 10/21/83

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

OCT 28 1983

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY smn