

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 So. Colo. Blvd., Denver, Co. 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FNL & 1750' FEL, Unit B
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) Spud, surface & production csg	

5. LEASE
SF 080246

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Florance

9. WELL NO.
57-R

10. FIELD OR WILDCAT NAME
Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 22, T-29-N, R-9-W

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5809' GL

(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.)*

7/1/79 - 7/5/79

Spudded 12 1/4" hole on 7/1/79 and drilled to 190'. Ran 4 jts 8 5/8", 24#, K-55 csg & set @ 189'. Cemented w/160 Sx Class "B" cement, 2% CACL2, 1/4# Sx Flocele. WOC 12 hrs. NUBOE. Pressure tstd csg to 1000 psi for 30 min - held ok. Reduced hole to 7 7/8" and drilled to T.D. @ 2479' on 7/5/79. Ran electric logs. Ran 78 jts 4 1/2", 10.5#, K-55 csg & set @ 2478'. Cemented w/550 Sx class "B" 50/50 poz mix, 6 1/4# Sx Gilsonite, 1/4# Sx Flocele, 0.2% B-31, followed by 100 Sx neat cement. WOC 12 hrs. Released rig. WOC.

U. S. GEOLOGICAL SURVEY
FARMINGTON, N.M.

Subsurface Safety Valve: Manu. and Type

Set @

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

SIGNED Carley Statton TITLE Admin. Supervisor DATE 7/11/79

(This space for Federal or State office use)

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

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between, and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

1. UNIT AGENCY	2. WELL NO.	3. WELL NAME	4. WELL TYPE
5. WELL LOCATION	6. WELL DEPTH	7. WELL DIRECTION	8. WELL STATUS
9. WELL DATE	10. WELL TIME	11. WELL TIME	12. WELL TIME
13. WELL TIME	14. WELL TIME	15. WELL TIME	16. WELL TIME
17. WELL TIME	18. WELL TIME	19. WELL TIME	20. WELL TIME

NOTE: For more information, contact the Bureau of Land Management, Department of the Interior, Washington, D.C. 20460. (204) 241-1444.

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT	
WELL ABANDONMENT AND REPORT OF WELL	
1. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE	
2. REPORT OR OTHER DATA	
3. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 1)	
4. ADDRESS OF OPERATOR	
5. NAME OF OPERATOR	
6. WELL TYPE	
7. WELL NO.	
8. WELL NAME	
9. WELL LOCATION	
10. WELL DEPTH	
11. WELL DIRECTION	
12. WELL STATUS	
13. WELL DATE	
14. WELL TIME	
15. WELL TIME	
16. WELL TIME	
17. WELL TIME	
18. WELL TIME	
19. WELL TIME	
20. WELL TIME	

APPROVED BY: _____ DATE: _____

18. hereby certify that the foregoing is true and correct

Subsurface Safety Valve: Manual and Type