

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

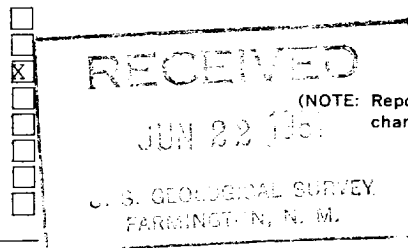
3. ADDRESS OF OPERATOR
P. O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1790' FNL 800' FWL "E"
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:



(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.)*

6/9/81 - RIH w/tbg and bit. Tagged cmt @ 7360'. Drill out to PBTD. Pressure test to 3500 PSI. Good. Circ hole clean w/1% KCL water. POOH w/tbg and bit. Ran GR-CCL. Perf Dakota w/3-1/8" csg gun @ 2 JSPF as follows: 7435-45', 7485-63', 15' 30 holes. RIH w/tbg, seating nipple and full bore pkr to liner top. 7458-63'
6/10/81 - Set pkr @ 7401'. Break down perfs @ 2200 PSI. Estab rate w/1% KCL water: 8 BPM @ 4000 PSI. Acidize w/600 gals 15% weighted HCL and 45 balls. Did not obtain good ball off. Released and reset pkr @ 7281'. Acidize w/600 gals 15% weighted HCL and 45 balls. Ball off complete. Release pkr. Run to PBTD. Pulled up to 7404'. Reset pkr. Opened bypass and reversed acid out. Swabbed 70 bbls water and acid. Well making small amount of gas.
6/11/81 - SITP: 450 PSI. Blew tbg down. Fluid level 4000'. Recovered 15 bbls fluid in 8 hrs.

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

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

SIGNED Carly Martin TITLE Asst. Div. Adm. Mgr. DATE 6/18/81

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NMOCC

JUL 01 1981
BY Dean Elliott
FARMINGTON DISTRICT