

**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

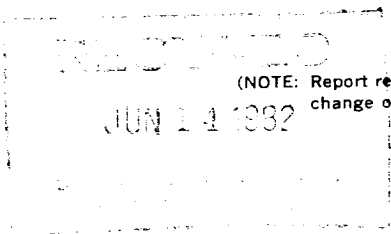
3. ADDRESS OF OPERATOR
Box 3249 Englewood CO 80155

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1,190' FSL, 2,130' FEL
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.)

5. LEASE USA SF-080245	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Hammer	
9. WELL NO. <u>11</u> <u>1A</u>	
10. FIELD OR WILDCAT NAME Blanco Mesaverde/Und. Gallup	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20, T29N, R9W	
12. COUNTY OR PARISH San Juan	13. STATE NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 5698' GR	

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.)*

6/9/82 Perf'd Gallup lower zone w/l JSPF 5830-50', 5861-70', 5882-93', 5896-5903', 5916-22', 5937-42', 5957-62', 5970-74', 5977-86', 5999-6006', 83', 83 holes. Well lost 150 BF after 2nd gun run. No brk dn press. Estab. rate of 20 BPM at 850 psi. Acidize & ball off w/1600 gal 15% weighted HCL & 124 1.1 SG ball slrs. Ball off complete. Roundtripped junk basket. Frac'd w/40,000 gal. 70% quality foam & 85,000# 20/40 SD. AIR 30 BPM, AIP 2180 psi. SI 1 1/2 hrs. Press down to 2030 psi. Flwd back thru 1/2" bullplug. Left flwg.

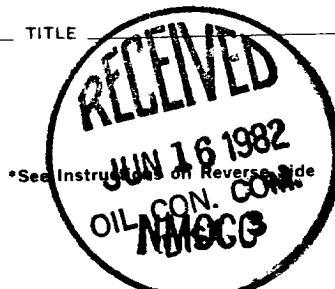
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Denise Wilson TITLE Prod. Analyst DATE 6/11/82

(This space for Federal or State office use)

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



ACCEPTED FOR RECORD

JUN 15 1982

FARMINGTON DISTRICT
BY SNH

*See Instructions on Reverse Side