Form 9-331 (May 1963)

UNITED STATES

SUBMIT IN TRIPLICATES (Other Sustructions on re-

Form approved No. 42 R1424.

2. NAME OF OPERATOR Tenneco Oil Comp	8. FARM OR LEAGE NAME HOWEll			
3. ADDRESS OF OPERATOR	9. WEL# NO.			
1860 Lincoln St	#1A ·			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		19. FIELD AND POOL, OR WILLICAT Blanco Mesa Verde		
:	11. SEC., T., E., M., OH BEK. AND SURVEY OR AREA Sec. 20, T30N, R8W			
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISE	1 13. STATE	
	5749'	San Juan	New Mexico	

NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING SHOOTING OR ACIDIZING SHOOT OR ACIDIZE ABANDON* ABANDONMENT* REPAIR WELL CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starling 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.)*

4/7/77 - Spudded 13-3/4" hole at 4:45 P.M. to 218'. Set and cemented 5 Jts. of 9-5/8" csg at 213' with 225 sacks of cement. Circulated and waited on cement.



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18. I hereby certify that the foregoing is true and correct SIGNED A. M. M. S.	TITLE Division Production	Manager	DATE 41-13-77
(This space for Federal or State office use)		<u></u>	
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE .		DATE