UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

	Badget Bureau No. 42+R1424
	5. LEASE SF-065557
_	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNIT AGREEMENT NAME
t 	8. FARM OR LEASE NAME Cornell E
	9. WELL NO. 1E
	10. FIELD OR WILDCAT NAME Basin Dakota
_	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12; T29N; R12W
	12. COUNTY OR PARISH 13. STATE San Juan New Mexico
	14. API NO.

(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 XXother well 2. NAME OF OPERATOR Tenneco Oil Company 3. ADDRESS OF OPERATOR 720 S. Colo. Blvd., Denver, CO 80222 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 below.) 820'FNL, 1550'FWL AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 5817'GR SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING

Report on Drilling Operations

(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.)*

5/12-5/22/80

MULTIPLE COMPLETE CHANGE ZONES ABANDON*

(other)

Spudded $12\frac{1}{4}$ " hole 12:15PM, 5/12/80. Drilled to 343' and ran 8 jts of 9 5/8", 36# csq & set @ 342'. Cmt w/250 sxs CL B 2% CACL2. Circ to surface. Reduced hole 7 7/8" and drilled to TD of 6617' on 5/20/80. Ran 208 its of $4\frac{1}{2}$, $10.5\frac{1}{2}$ csq & set @ 6609'. Cmt 1st stage w/400 sxs 65/35 Pozmix and followed w/150 sxs CL B neat. Open DV tool and circulated. Cmt second stage w/1350 sxs lite. Circ to surface. Released rig 5/22/80. WOCU.

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Subsurface Safety Valve: Manu.	and Type			<i>f</i> Ft.
18. Thereby certify that the form	egoing is the and corrects t. Di	v. Manager date	June 12, 1980	
	(This space for Federal or	State office use)		
APPROVED BY	TITLE	DATE		

ACCEPTED FOR TECONO

ACCEPTED FOR DECORD

JUN 19 1980

*See Instructions on Reverse Side

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