

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 ☐ gas ☒ 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: 1780' FNL & 990' FEL "H"
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:

☒
☒
☐
☐
☐
☐
☐
☐

RECEIVED

(NOTE: Report results of multiple completion or zone change on Form 9-330)

U.S. GEOLOGICAL SURVEY
WASHINGTON, D.C. 20508

JUN 17 1981
OIL CON. COM.
DIST. 3

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.)*

4/21/81. Release rig 4/20/81.

5/30/81. MIRUSU.

6/2/81. RIH w/tbg and bit. Tag cmt @ 6500'. Drill out to shoe. Pressure test csg to 3500 PSI. Test good. Circ hole w/1% KCL water. Spot 500 gals 7½% DI-HCL @ 6585'. POOH w/tbg and bit.

6/3/81. Ran GR/CCL over Dakota and Chacra. Perf'd Dakota w/3-1/8" csg gun @ 2 JSPF as follows: 6522-25', 6540-44', 6552-56', 6585-89'. 17' 34 holes. Breakdown perfs @ 2600 PSI. Estab rate: 20½ BPM @ 1750 PSI. Acidize w/700 gals weighted 15% HCL and 51-1.1 spec grav ball sealers. Ball off complete. RIH w/junk basket; recover 50 balls. Frac Dakota w/30,000 gals 30# XL gel and 50,000# 20/40 sand. RA sand thruout. AIR: 21½ BPM AIP: 1600 PSI ISIP: 1550 PSI. 15 min SIP: 1100PSI.

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

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

SIGNED Carolyn J. Hester TITLE Asst. Div. Adm. Mgr DATE 6-8-81

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

NMOCC

BY Dean Elliott