UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE*
(Other Instructions on reverse side)

Form approved.

Budget Bureau No. 42-R1424

D. LIASE DESTINATION AND SEPLIE NO.

	DEPARIMENT OF THE INTERIOR verse side) GEOLOGICAL SURVEY	5. LI ASE DESIGNATION AND SERIAL NO. ST 078042	
	SUNDRY NOTICES AND REPORTS ON WELLS Define the form for proposals to drill or to deepen or plug back to a different reserve Use 'APPLICATION FOR PERMIT—" for such proposals.)	6. IN INDIAN, ASSOCITEE OR TRIBE NAME	
	OIL GAS X OTHER	7. U IT AGREEMENT NAME	
2. s	SAME OF OPERATOR	8. FARM OR LEASE NAME	
	Tenneco Oil Company	Gomi Com "A"	
	1860 Lincoln St., Suite 1200, Denver, Colorado 80203	9. W LL NO.	
	OCATION OF WELL (Report location clearly and in accordance with any State requirements.	1	
F.7	See also space 17 below.) At surface	10. F ELD AND POOL, OR WILDCAT	
	3.5501 501 1.305 1.504	Blanco P. C.	
	1650' FSL and 1650'FWL	SURVEY OR AREA	
14. P	PERMIT NO. 15. ELEVATIONS (Show whether BF, RT, GR, etc.)	Unat K, Sec. 28, T30N, R9W	
	5918' KB	12. COUNTY OF PARISH 13. STATE	
 16.	Charle Assessment Pro Toll It is No. (A) in D		
	Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		
		SUBSEQUENT REPORT OF:	
	TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	REPAIRING WELL,	
	FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATM SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACID		
	REPAIR WELL X CHANGE PLANS (Other)	ABANDON MANT	
	(Other) (Note: Repu	ort results of multiple completion on Well or Recompletion Report and Log form.)	
17. ы	proposed work. If well is directionally drilled, give subsurface locations and measured and to this work.) •	nent dates, including estimated date of starting any rue vertical depth of or all markers and zones perti-	
1	1. Cover perfs with sd & calseal. PU 1½" tbg w/pkr and locate csg leak.		
2	2. Sqz hole below pkr with ± 100 sxs cmt. W.O.C.		
3	3. Drill out cmt and press tst csg.		
4	4. If press tst fails, repeat steps 2 & 3.		
5	5. Run 1½" tbg.		
6	6. Treat as necessary to establish commercial gas production.		
7	7. Swab well back and place on production.		
8	3. Clean up area.	. 46	
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		en e	
iš. I	hereby certify that the foregoing is true and correct		
SI	IGNED Div. Prod. Manage	r ATE 2 3/- 26.	
	This space for Federal or State office use)	PATE 1 2 7 C 2	
ΑI	PPROVED BYTITLE	- REMIVED	
CC	ONDITIONS OF APPROVAL, IF ANY:		

APR 5 1976