

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
720 So. Colo. Blvd., Denver, Co. 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1005' FNL & 1795' FEL, Unit B
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:

☐
☒
☒
☐
☐
☐
☐
☐

5. LEASE

USA SF 078201

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Florance

9. WELL NO.

112

10. FIELD OR WILDCAT NAME

Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 24, T-30-N, R-9-W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5804' GL

(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.)*

6/7/79 - 6/13/79

MIRUCU. NUBOP. Ran electric logs. Pressure tstd csg to 2500 psi for 10 min-held ok. Spotted 300 gal DI 15% MCA acid. Perforated Pictured Cliffs formation from 2533-2537, 2556-2563, 2578-2586, 2606-2608 w/2 JSPF @ 7 1/2 bpm-800 psi. ISIP-300. Frac'd well w/500 gal 15% HCL, 90 bbl 70% quality foam, 25000 gal foam w/30000# 10/20 sand, 42 bbl foam flush. AIR-20 bpm @ 1500 psi. ISIP-1300 psi. Ran 1 1/4" tbq & set @ 2607'.

Subsurface Safety Valve: Manu. and Type

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

SIGNED Carley Hatten TITLE Admin. Supervisor DATE 6/15/79

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

APPROVED FOR: _____
 TITLE: _____
 DATE: _____
 SIGNED: _____
 TITLE: _____
 DATE: _____
 (This space for Federal or State office use)
 I hereby certify that the foregoing is true and correct
 Subsurface Safety Valve: Mann. and Type: _____

1219-1300 bbl. Run 1st time & set a 200' plug.
 1219-1300 bbl. Run 2nd time & set a 200' plug.
 1219-1300 bbl. Run 3rd time & set a 200' plug.
 1219-1300 bbl. Run 4th time & set a 200' plug.
 1219-1300 bbl. Run 5th time & set a 200' plug.
 1219-1300 bbl. Run 6th time & set a 200' plug.
 1219-1300 bbl. Run 7th time & set a 200' plug.
 1219-1300 bbl. Run 8th time & set a 200' plug.
 1219-1300 bbl. Run 9th time & set a 200' plug.
 1219-1300 bbl. Run 10th time & set a 200' plug.

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details including estimated date of starting and proposed work. If well is directionally drilled, measured and true vertical depths for all depths and zones pertinent to this work.)

ABANDON
 CHANGE ZONE
 MULTIPLE COMPLET
 HOLE OR AFTER CASING
 REPAIR WELL
 SHOOT OR ACIDIZ
 FRACTIONATE TREAT
 TEST WATER SHUT-OFF
 REQUEST FOR APPROVAL TO:
 SUBSEQUENT REPORT OF:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT OR OWNER DATA

15. TOTAL DEPTH
 14. TOP FACIL INTERVAL
 13. SURFACE: 1000' ELEV. 1775' ELEV. 1775' ELEV.

12. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17)

11. ADDRESS OF OPERATOR
 Thompson Oil Company
 720 So. Col. Blvd., Denver, CO 80202

10. NAME OF OPERATOR
 Thompson Oil Company

9. NAME OF OPERATOR
 Thompson Oil Company

8. WELL NO.
 1000

7. AREA
 1000

6. DATE
 1000

5. DATE
 1000

4. DATE
 1000

3. DATE
 1000

2. DATE
 1000

1. DATE
 1000