Form 9-331 (May 1963)

UNITED STATES SUBMIT IN TRIPLICATE* Other Instructions on re DEPARTMENT OF THE INTERIOR verse side) Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SURVEY	NM-013626	
SUNDRY NOTICES AND REPORTS O		
OIL GAS WELL OTHER	7. UNIT AGREEMENT NAME	
WE'L L WELL A OTHER 2. NAME OF OPERATOR	8. FARM OR LEASE NAME	
Tenneco Oil Company	Pritchard	
3. ADDRESS OF OPERATOR	9. WELL NO.	
1200 Lincoln Tower Bldg., Denver, Colorado	80203	
4. LOCATION OF WELL (Report location clearly and in accordance with any S	State requirements.* 10. FIELD AND POOL, OR WILDCAT	
At surface 11 below, 1190 FNL/1650 FEL	Basin Dakota	
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
	Sec 34. T31N, R9W	
14. PERMIT NO. 15. ELEVATIONS (Show whether DF,		
6007 GR	San Juan New Mexic	
16. Check Appropriate Box To Indicate No.	ature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
[] []		
TEST WATER SHUT-OFF PULL OR ALTER CASING	WATER SHUT-OFF REPAIRING WELL FRACTURE TREATMENT ALTERING CASING	
FRACTURE TREAT SHOOT OR ACIDIZE MULTIPLE COMPLETE ABANDON*	FRACTURE TREATMENT ALTERING CASING SHOOTING OR ACIDIZING ABANDONMENT*	
REPAIR WELL CHANGE PLANS	(Other) Shut-In	
(Other)	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
	details, and give pertinent dates, including estimated date of starting any ions and measured and true vertical depths for all markers and zones perti-	
proposed work. If well is directionally drilled, give subsurface locatinent to this work.) *	ions and measured and true vertical depths for all markers and zones perti-	
CTATUS OF USE About in		
STATUS OF WELL: shut-in		
APPROXIMATE DATE THAT TEMP. ABAND. COMMENC	rn. 101v 1071	
APPROXITIATE DATE THAT TEEP. ADAMD. COMMENC	ED: July 1971	
REASON FOR TEMP ABAND: not commercial at o	ld gas prices	
FUTURE PLANS FOR WELL: to be placed on pro-	duction when mkt available	
APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING	G: 1/1/76	
	NOV 1 0 1974	
	1 The state of the	
	OF SOM COM	

18. I hereby certify that the foregoing is true and correct SIGNED Williams	Division Production Manager	DATE 11675
(This space for Federal or State office use)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE