

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on  
reverse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> convert to WIW	5. LEASE DESIGNATION AND SERIAL NO. NM-7951
2. NAME OF OPERATOR Tenneco Oil Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 7990 IH 10 West, San Antonio, TX 78230	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980 FNL & 660 FEL	8. FARM OR LEASE NAME Leonard Bros.
14. PERMIT NO.	9. WELL NO. 27
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3019 KB 3008 GL	10. FIELD AND POOL, OR WILDCAT S. Leonard
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, T26S, R37E
	12. COUNTY OR PARISH Lea
	13. STATE New Mexico

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/> convert to WIW	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

1. MIRU PU. POOH w/rods and pump. Laid down rods. NUBOP. Tagged bottom and POOH w/tbg.
2. RIH w/2 7/8 tubing and 5 1/2" treating packer. Set packer at 3345'. Loaded backside w/2% KCL.
3. Pumped 500 gals, xylene down tubing (avg. rate was 2.0 BPM) and 5000 gals 15% HCL (same rates)
4. Unset pkr. POOH w/tbg. and pkr. Laid down tbg. RIH w/2 7/8 8RD J55 plastic coated tbg. and plastic coated injection packer to 3265'.
5. Circulated hole w/packer fluid containing corrosion inhibitor, oxygen scavenger and biocide.
6. Set pkr. at 3265' NDBOP.
7. Hook up injection line.
8. RDPV.

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

SIGNED

TITLE Production Engineering Supv. DATE 7-18-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY  
CONDITIONS OF

Subject to  
Like Approval  
by State

TITLE

DATE

JUL 25 1984

\*See Instructions on Reverse Side

RECEIVED

JUL 27 1984

RECEIVED  
HONORARY