

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 "APPLICATION FOR PERMIT" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Tenneco Oil Company

3. ADDRESS OF OPERATOR
720 So. Colorado Blvd., Denver, Colorado 80222

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 835 ' FWL and 930 ' FWL, Unit

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)
6,695 GR

5. LEASE DESIGNATION AND SERIAL NO.
09-000110

6. IF INDIAN, ALLOTTEE OR ESTATE NAME
Jicarilla, Dulce
N.M.

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jicarilla "A"

9. WELL NO.
9

10. FIELD AND POOL, OR WILDCAT
Tapacito Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 20 T26N R5W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☒
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐	(NOTE: Report results of multiple completion or Well Completion or Recompletion Report and Log form.)	
FULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETE	☐	ALTERING CASING	☐
ABANDON*	☐	ABANDONMENT*	☐
CHANGE PLANS	☐		

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting a 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.)

DRILD TO 684'. RAN LOGS. RAN 158 JTS 4 1/2", 10.5# CSG. SET @ 6843'. CMT FIRST STAGE W/ 175 SX LITE CMT FOLLOWED BY 150 SX NEAT. P.D. @11:10 PM 10/9/78. CIRCULATED TRACE CMT. WOC 4 HRS. CMT 2nd STAGE W/450 SX LITE FOLLOWED BY 50 SX NEAT. PD 4:26 PM 10/10/78. DID NOT CIRC CMT. WOCU.

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

SIGNED

Carley Matthews

TITLE: Administrative Supervisor

DATE 10/17/78

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

RECEIVED
DATE

OCT 23 1978

*See Instructions on Reverse Side

U.S. GEOLOGICAL SURVEY