

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. Colorado Blvd., Denver, CO. 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 835' FWL & 980' FNL, Unit D
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
09-000110

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

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jicarilla "A"

9. WELL NO.
9

10. FIELD OR WILDCAT NAME
Tapacito Gallup

11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
Sec. 20, T-26-N, R-5-W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6695' GR

(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.)*

4/25/79 - 5/2/79

MIRUPU. TOH w/tbg & rods. NUBOE. TIH w/208 jts 2 3/8" tbg and packer; set packer @ 6562' KB. Loaded annulus w/wtr & pressured to 1000#. Acidized w/147 bbl acid foam w/2500 gal 15% MCA & 200000 SCF N2. Max injection pressure-3800#. ISIP-1800#. SITP-475 psi. Recovered 38 BW. NDBOE. RDCU, and released rig. This well is shut in pending further evaluation and/or P & A alternatives.

Subsurface Safety Valve: Manu. and Type

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

SIGNED

Charles J. Hatten

TITLE Admin. Supervisor

DATE

5/14/79

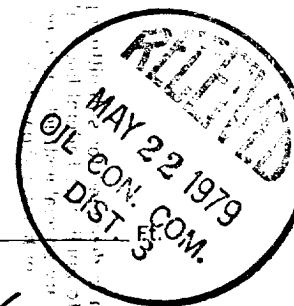
(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



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.

DATE

This space for Federal or State official use

Signed _____
 IS a hereby signed and attested to be true and correct

Specimen to be sent to Bureau of Land Management and BLM

GPO : 1976 O - 2147149

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF PROPOSED REPORT OR OTHER DATA

- ☐ REQUEST FOR APPROVAL TO
- ☐ TEST WELL SHUT OFF
- ☐ FRACTURE TREAT
- ☐ SHOOT OR ACIDIZE
- ☐ REPAIR WELL
- ☐ PUMP OR ALTERN CASING
- ☐ MULTIPLE COMPLETS
- ☐ CHANGE DEPTH
- ☐ ABANDON

17. DESCRIBE PROPOSED OR COMPLETED OPERATION, REPORT STATE OF WELL AND PROPOSED OR COMPLETED DATE OF STOPPING ANY PROPOSED WORK. If well is directionally drilled, include an estimated date of starting any proposed work. If well is directionally drilled, include an estimated date of starting any proposed work.

18. LOCATION OF WELL (REPORT LOCATION CLEARLY, SEE INSTRUCTIONS)
 AT AVERAGE COST PER ACRE PER UNIT
 AT AVERAGE COST PER ACRE PER UNIT
 AT AVERAGE COST PER ACRE PER UNIT

19. LOCATION OF WELL (REPORT LOCATION CLEARLY, SEE INSTRUCTIONS)
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20. LOCATION OF WELL (REPORT LOCATION CLEARLY, SEE INSTRUCTIONS)
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