

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | | 7. UNIT AGREEMENT NUMBER |
| 2. NAME OF OPERATOR Tenneco Oil Company | | 8. FARM OR LEASE NAME Omler |
| 3. ADDRESS OF OPERATOR 1200 Lincoln Tower Bldg., Denver, Colorado 80203 | | 9. WELL NO. 5 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <div style="text-align: center; font-size: 1.2em; font-weight: bold;">10 20 FWL / 990' FWL</div> | | 10. FIELD AND POOL OR FIELD CAT Fulcher KUT-PC 11. SEC. T. R. M. OR BLM. AND D SURVEY OR ABL. 50626, T23N, R10W |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, CR, etc.) <div style="text-align: center; font-size: 1.2em; font-weight: bold;">5809 K13</div> | |
| 12. COUNTY & PARISH & STATE SAN JUAN NM | | |

13. 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 type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <u>Shut-In</u> <input checked="" type="checkbox"/> | |

(NOTE: Report results of multiple completion or 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.) *

STATUS OF WELL:

SHOT-IN

APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED:

10/65

REASON FOR TEMP ABAND: Low deliverability

FUTURE PLANS FOR WELL: Review for stimulation

APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING: 1-1-76

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

SIGNED

TITLE

DATE _____

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE _____

CONDITIONS OF APPROVAL, IF ANY: