UNITED STATES DEPARTMENT OF THE INTERIOR

	Form Approved. Budget Bureau No. 42-R1424	
	5. LEASE SF-077085	
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
	7. UNIT AGREEMENT NAME	
-	8. FARM OR LEASE NAME Omler A	
-	9. WELL NO. 5E	
-	10. FIELD OR WILDCAT NAME Basin Dakota/Bl. Chacra 11. SEC., T., R., M., OR BLK. AND SURVEY O AREA Sec 25 T28N ElOW	
-		
	12. COUNTY OR PARISH 13. STATE San Juan New Mexico	
_	14. API NO.	
	15. ELEVATIONS (SHOW DF, KDB, AND WD 5802' gr	
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GEOLOGICAL SURVEY	
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME Omler A
1. oil gas well other	9. WELL NO. 5E
2. NAME OF OPERATOR Tenneco Oil Company	10. FIELD OR WILDCAT NAME Basin Dakota/Bl. Chacra
3. ADDRESS OF OPERATOR P.O. Box 3249 Englewood, Co 80155	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Sec 25 T28N E10W
below.) AT SURFACE: 1750' FNL 890' FWL "E" AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE San Juan New Mexico
AT TOTAL DEPTH:	14. API NO.
 CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 	15. ELEVATIONS (SHOW DF, KDB, AND WD) 5802' gr
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	5802 gr
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE	
REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertined.)	ent to this work.)*
1/28/81. Drilled to TD of 6465' 1/27/81. PO	OH for logs. Log w/Dresser Atlas
1/29/81. RU and run 42 jts (1903') 45" 10.5# Cmt w/122sx 65/35 POZ and 6% gel. Tailed in the 15 bbls. cmt ND BOP. Release rig 1/28/81.	csg. set @ 6464. TOL @ 4549'. w/l50sx Class B. PD Reverse out
	OIL CON. COM. DIST. 3
Subsurface Safety Valve: Manu. and Type	Set @F
18. I hereby certify that the foregoing is true and correct	
SIGNED AMY AUTON TITLE ASST.DIV.G	en.Mgr.DATE <u>February 2, 1981</u>
(This space for Federal or State	office use)
ACCEPTED FOR RECURD TITLE TITLE	DATE
FEB 1 7 1981 NMOCC	

BARMINGTON DISTRICT

NMOCC