

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 S. Colorado Blvd., Denver, CO 80222
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 800'FSL, 1670;FEL, Unit 0  
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\* ☐

SUBSEQUENT REPORT OF:

- (other) Status Report: Completion

5. LEASE  
USA-SF-079947
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Helen Jackson
9. WELL NO.  
E1 A
10. FIELD OR WILDCAT NAME  
Basin Dakota Mesa Verde
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 34; T29N; R9W
12. COUNTY OR PARISH  
San Juan
13. STATE  
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5811'GL

(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.)\*

12/1/79-12/23/79

MIRUCU. Perf'd from 4046'-4050', 4580'-4584', 4410'-4414' on 12/5, squeezed perfs w/200sxs CLB and 1% D-56. Perf'd Dakota 6582-6600, 6680-6690, 6708-6720 w/2 SPF (88 holes). Acidized w/1000 gal 15% HCL and 162 balls. Frac'd w/105000# 20/40 sand in 80000 gal of crosslinked gel in 2 stages. Landed 2 3/8" tubing @ 6752'. Released CU on 12/23. Flowing well to clean up.

Subsurface Safety Valve: Manu. and Type

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

SIGNED Charles J. Hartman TITLE Admin. Supervisor DATE

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

