Form Approved.
... Budget Bureau No. 42-R1424

5. LEASE USA-SF-078095

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME
1. oil gas X other	Case "A" Bes S Ansi
2. NAME OF OPERATOR	9. WELL NO. 4.7.5.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2
Tenneco Oil Company 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Basin Dakota
720 So. Colorado Blvd., Denver, CO 80222 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
below.) AT SURFACE: 950' FNL & 1070' FWL, Unit D AT TOP PROD. INTERVAL:	Sec. 17, T-31-N, R-11-W 12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	San Juan Seal New Mexico ◆ 14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: \Box	<u>6279' GLO 의 현행 의 의 의 의 의 의 의 의 의 의 의 의 의 의 의 의 의 </u>
FRACTURE TREAT \(\bigcirc \) SHOOT OR ACIDIZE \(\bigcirc \)	4 Page 1
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
MULTIPLE COMPLETE	gereiden
(other)	
 DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent 7/20/79 - 7/30/79 	rectionally drilled, give subsurface locations and
MIRUCU. NUBOE, Pressure tstd csg to 3500 psi for logs. Spotted 500 gal 7 1/2% MCA acid. Perfo	15 min - held ok. Ran electric
7318 - 7336, 7346 - 7358, 7404 - 7416, 7428 - 74 Acidized w/1500 gal 15% MCA acid. Frac'd well w	42 w/2 JSPF @ 26 bpm - 2700 psi.
water pad, 60,000 gal water w/80,000# 20/40 sand w/8200 gal Gel @ 48 bpm - 3100 psi. ISIP - 2000	l & 25,000# 10/20 sand. Flushed peri
FTP - 20 psi, FCP - 450 psi. RDMOCU.	
	LUG OB
Subsurface Safety Valve: Manu. and Type	COLOGON Set @ Ft.
18. I hereby certify that the foregoing is true and correct SIGNED WILL DOWN TITLE Admin. Supervi	SOF DATE 8/2/74
(This space for Federal or State office use)	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
nynocc	Fig. 19 may 1 may