

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  
Box 3249, Englewood, CO 80155  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1520' FSL, 1715' FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

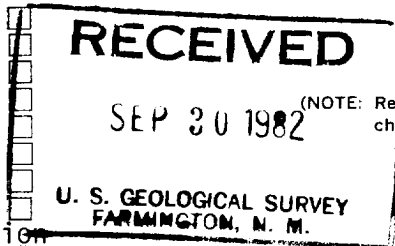
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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) Notification of Production

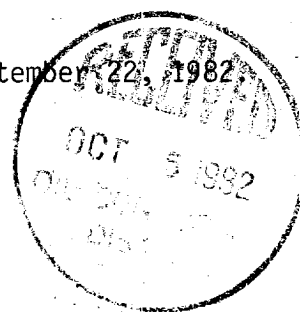


(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE  
SF-078040  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Mudge Com B  
9. WELL NO.  
1E  
10. FIELD OR WILDCAT NAME  
Basin Dakota  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 11, T31N, R11W  
12. COUNTY OR PARISH  
San Juan  
13. STATE  
NM  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5898' GR

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.)\*

The above-referenced well was put on production September 22, 1982.



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Denise Wilson TITLE Production Analyst DATE September 27, 1982

(This space for Federal or State office use)

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

NMOCC

\*See Instructions on Reverse Side

OCT 1 1982

FARMINGTON  
BY SMH