

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
6800 Park Ten Blvd., San Antonio, TX. 78213
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990 FSL & 1980 FWL
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* ☐

(other) Spudded Well - 5-26-80

SUBSEQUENT REPORT OF:

☐ **RECEIVED**

MAY 30 1980

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

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

5. LEASE
NM-0374057 - A C:SF
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NA
7. UNIT AGREEMENT NAME
Catclaw Draw Unit
8. FARM OR LEASE NAME
N/A
9. WELL NO.
12
10. FIELD OR WILDCAT NAME
Catclaw Draw Morrow
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 24, T21S, R25E
12. COUNTY OR PARISH
Eddy
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3437 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.)*

5-27-80 250' TD-MIRU Warton Rig 7. Spudded @ 10:00 a.m. Monday 5-26-80. Lost returns @ 36'. Dry drilling. 8.4/27/NC.

5-28-80 Ran 7 jts of 13-3/8" 54.50# K-55 STC (310.35') shoe depth @ 298'. Cmt. w/330 sx "C" + 2% CaCl. Topped w/3yds Redi Mix. Calculated top of cmt. @ 15' from surface. Plug down @ 12:40 p.m. w/300 psi 5-27-80. WOC-18 1/4 hrs.

RECEIVED

JUN 2 1980

Subsurface Safety Valve: Manu. and Type

Set @ O. C. D.
ARTESIA, OFFICE - Ft.

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

SIGNED Mary Hall TITLE Production Analyst DATE 5/28/80

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MAY 9 1980

