| DEPARTMENT OF THE INTERIOR Of the instructions on the GEOLOGICAL SURVEY  SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or plus pack to a different reservoir.  SUNDRY MOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or plus pack to a different reservoir.  To not well to drill or to deepen or plus pack to a different reservoir.  Sunday or others are well to drill or to deepen or plus pack to a different reservoir.  Tonneco Oil Company  3. Address or otherson  Tonneco Oil Company  3. Address or otherson  Tonneco Oil Company  3. Address or otherson  Tonneco Oil Company  4. Location of will Report location clearly and in accordance with any State requirements.  A surface of the brown, At surface or 1 below, At s | NAME               |
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| 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.  1. Old Well Gas Well Mother  Old Well Gas Well Mother  2. NAME OF OFFRATOR  Tonneco Oil Company  3. Address of Offrator  Tonneco Oil Company  4. Location of well (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  990' FSL 860' FWL  16. Elevations (Show whether DF, RT, OR, etc.)  6594 GR  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT  MULTIPLE COMPLETE  REPAIR WELL  (Other)  Change Plans  CHANGE PLANS  CHANGE PLANS  CHANGE PLANS  MULTIPLE COMPLETE  REPAIR WELL  (Other)  17. DEFINITION OR ACIDIZE  REPAIR WELL  CHANGE PLANS  CHANGE PLANS  CHANGE PLANS  MULTIPLE COMPLETE  REPAIR WELL  CHANGE PLANS  CHANGE PLANS  CHANGE PLANS  MULTIPLE COMPLETE  REPAIR WELL  CHANGE PLANS  CHANGE PLANS  CHANGE PLANS  CHANGE PLANS  MULTIPLE COMPLETE  REPAIR WELL  CHANGE PLANS  CHANGE PLANS  CHANGE PLANS  CHANGE PLANS  COMPLETE OF RECURSION OF MELL REPORT OF:  MULTIPLE COMPLETE  REPAIR WELL  CHANGE PLANS  COMPLETE OF RECURSION OF MELL REPORT OF REcursion of Multiple completion on Mell  COMPLETE OF RECURSION OF MELL  COMPLETE  | 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.  1.  |                    |
| (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.    Jicarilla Dulce N  |                    |
| OLL GAS WELL OTHER  2. NAME OF OPERATOR Tenneco Oil Company 3. Address of Operator Box 1714, Durango, Clorado 4. Location of well (Report location clearly and in accordance with any State requirements.*  See also space 17 below.) At surface 990' FSL 860' FWL  15. Elevations (Show whether DF, RT, OR, etc.) 6594 GR  10. FIELD AND FOOL, OR WILDCAY Bassin Dakota Under Bassin Dakota Under 11. SEC., T., R., M., OR BLER, AND SURVEY OR AREA  NO Sec. 15, T26N, R5  14. PERNIT NO.  15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6594 GR  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDONMENT*  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and sone nent to this work.)*  | .M.                |
| Tenneco Oil Company  3. Address of Operator  Box 1714, Durango, Colorado  4. Locarion of Well (Report location clearly and in accordance with any State requirements.*  See also spince 17 below.)  At surface  990' FSL 860' FWL  15. Elevations (Show whether DF, RT, GR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Notice of intention to:  TEST WATER SHUT-OFF FRACTURE TREAT  MULTIPLE COMPLETE  ABANDON*  SHOOT OR ACIDIZE  ABANDON*  SHOOT OR ACIDIZE  ABANDON*  SHOOT OR ACIDIZE  ABANDON*  (Other)  (Other)  TSCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)*  |                    |
| 3. ADDRESS OF OPERATOR  BOX 1714, Durango, Chorado  4. Location of well (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  990' FSL 860' FWL  15. ELEVATIONS (Show whether DF, RT, OR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON*  SHOOT OR ACIDIZE ABANDON*  CHANGE PLANS  (Other)  COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start perfored work.) **  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start perfored work.) **  18. WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start perfored work.) **  18. WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* (Other)  (Other)  19. WELL NO.  10. FIELD AND FOOL, OR WILDCAN Basin Dakota Unde  11. SEC, T., R., W., OR BELK. AND SUBSEQUENT REPORT, OR OTHER TREATMENT ALTERING WELL ALTERING CASING NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  WATER SHUT-OFF FRACTURE TREATMENT ALTERING CASING ABANDONMENT*  (Other)  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start performent to this work.) **   |                    |
| 3. ADDRESS OF OPERATOR  BOX 1714, Durango, Glorado  4. Location space 17 below.) At surface  990' FSL 860' FWL  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and sone neat to this work.)*  |                    |
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| At surface  990' FSL 860' FWL  11. SEC., T., R., M., OR BLE. AND SURVEY OF AREA University of AREA Universit |                    |
| Sec. 15, T26N, R5  14. PERMIT NO.  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)  |                    |
| 14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  6594 GR  Rio Arriba N.M  16.  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASING MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDONMENT*  (Other)  (NOTE: Report results of multiple completion on Well (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)*   | lt M               |
| Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE REPAIR WELL (Other)  (Other)  TO SECRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)*   | Į                  |
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| NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF  PULL OR ALTER CASING  SHOOT OR ACIDIZE  REPAIR WELL  (Other)  (Other)  TO DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)*   |                    |
| FRACTURE TREAT  MULTIPLE COMPLETE  SHOOT OR ACIDIZE  REPAIR WELL  (Other)  (Other)  (Other)  (Other)  Completion or Recompletion Report and Log form.)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)*   | 7                  |
| SHOOT OR ACIDIZE  REPAIR WELL  (Other)  (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)  | -                  |
| (Other)  (Other)  (Other)  (Other)  (Other)  (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)  17. Describe Proposed or completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)  | -                  |
| (Other)  (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)  17. Describe proposed or completed operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)  | -                  |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zone nent to this work.)*   | _                  |
| Rig up 8-2-65 drill to 465, ran 15 jts 8-5/8 casing, 25lb, set at 462. Cement w/250 sacks cement circulated to surface. WOC. Now drilling to TD.   | ng any<br>s perti- |
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|   | U. S. GEOLOGICAL SI<br>FARMINGTON, N. | DIL COM. COM. DIST. 3 |
| 18. I hereby certify that the foresting is true and correct SIGNED HARDLD C. NICHOLS  H. C. Nichols | TITLE Senior Production Clerk         | DATE 8-11-65          |
| (This space for Federal or State office use)  APPROVED BY CONDITIONS OF APPROVAL, IF ANY:           | TITLE                                 | DATE                  |