

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY  
(Other instructions on reverse side)

## 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 "APPLICATION FOR PERMIT—" for such proposals.)

|   |  |   |
|---|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>  |  | 5. LEASE DESIGNATION AND SERIAL NO.                                     |
| 2. NAME OF OPERATOR<br>Tenneco Oil Company  |  | 6. IF INDIAN, ALLOCATION OR TRIBE NAME<br>Jicarilla Cont 109            |
| 3. ADDRESS OF OPERATOR<br>1200 Lincoln Tower Bldg., Denver, Colorado 80203  |  | 7. UNIT AGREEMENT NAME  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>1850 FNL - 1150 FEL |  | 8. FARM OR LEASE NAME<br>Jicarilla 3                                    |
| 14. PERMIT NO.  |  | 9. WELL NO.<br>7  |
| 15. ELEVATIONS (Show whether DF, RT, CR, etc.)  |  | 10. FIELD AND POOL, OR WILDCAT<br>Tapacito Gallup                       |
|   |  | 11. SEC. T. R. M. OR NE. AND<br>SUBV. OR ADJ.<br>H 16. T. 26 N. R. 6 W. |
|   |  | 12. COUNTY OR PARISH<br>Rio Arriba                                      |
|   |  | 13. STATE<br>N.M.   |

18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO:                      |   | SUBSEQUENT REPORT OF:   |  |
|--|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>   | REPAIRING WELL <input type="checkbox"/>          |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input type="checkbox"/>   | ALTERING CASING <input type="checkbox"/>         |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>             | SHOOTING OR ACIDIZING <input type="checkbox"/>  | ABANDONMENT* <input checked="" type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) Shut-In   |  |
| (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 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.)\*

STATUS OF WELL: Tapacito Gallup ZONE SHUT-IN

APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED:

REASON FOR TEMP ABAND: Low deliverability

FUTURE PLANS FOR WELL: None\*

APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING: N/A

\* Note: Producing in Dakota

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

SIGNED

H. H. Myers

TITLE

Division Production Manager

DATE December 13, 1974

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE