well

below.)

REPAIR WELL

CHANGE ZONES

ABANDON*

AT SURFACE:

2. NAME OF OPERATOR

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.)

other

P. O. Box 3249, Englewood, CO 80155 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,

1720

1670' FNL

1850

1780' FWL

gas

well

Tenneco Oil Company 3. ADDRESS OF OPERATOR

> AT TOP PROD. INTERVAL: AT TOTAL DEPTH:

REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE

X

30484.
5. LEASE Contract 110
6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Jicarilla A
9. WELL NO.
10. FIELD OR WILDCAT NAME Dakota/Chacra
11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA
Sec. 18, T26N R5W
12. COUNTY OR PARISH 13. STATE
Rio Arriba New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

(other) 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.)*

U. S. GEOLOGICAL SURVEY

FARMINGION, N. M.

10/29/81 - In 4-1/2" liner, cmt was circulated out top of liner.

SUBSEQUENT REPORT OF:



Subsurface Safety Valve: Manu. and Typ	oe		Set @ Ft.
18. I hereby certify that the foregoing is	true and correct		
signed Saunda Jeron	TITLEProduct	tion Analyst DATE	10/30/81
Saundra Peron	(This space for Federa		
APPROVED BY	TITLE	DAT	
CONDITIONS OF APPROVAL, IF ANY:		;	• .