Form Approved. Budget Bureau No. 42-R1424

UNITED STATES DEPARTMENT OF THE INTERIOR

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REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: 1	Do not use this form for proposals to drill or to deepen or plug back to a different servoir. Use Form 9-331-C for such proposals.) 1. oil gas well well to other 2. NAME OF OPERATOR Tenneco 0il Company 3. ADDRESS OF OPERATOR BOX 3249, Englewood, C0 80155 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1,120' FSL, 790 FEL AT TOP PROD. INTERVAL: AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: EST WATER SHUT-OFF RACTURE TREAT HOOT OR ACIDIZE REPAIR WELL WILL OR ALTER CASING NULTIPLE COMPLETE HANGE ZONES BRANDON' other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertine including estimated date of starting any proposed work. If well is directionally drilled, give subsurface local measured and true vertical depths for all markers and zones pertinent to this work.)* 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertine including estimated date of starting any proposed work. If well is directionally drilled, give subsurface local measured and true vertical depths for all markers and zones pertinent to this work.)* 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent to this work.)* 18. FARM OR LEASE NAME ROMETO COMPLETE OF AUTOMATION (Clearly State all pertinent details, and give pertinent to this work.)*	GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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18. I hereby cartify that the foregoing is true and correct			Set @Ft.

*See Instructions on Reverse Side

(This space for Federal or State office use)

SEP 10 1982

AGGEPTED FOR RECORD

____ DATE ____

FARMINITAL POTENTIAL SM P. SM

__ TITLE __