

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  
Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 810' FNL, 1850' 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)

SUBSEQUENT REPORT OF:

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5. LEASE  
Contract #109

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Jicarilla B

9. WELL NO.  
7E

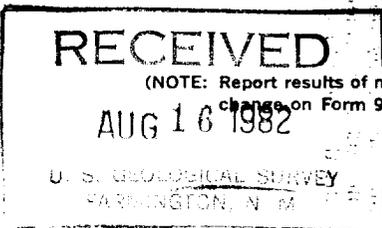
10. FIELD OR WILDCAT NAME  
Basin Dakota/Und. Chacra

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 16, T26N, R5W

12. COUNTY OR PARISH | 13. STATE  
Rio Arriba | NM

14. API NO.

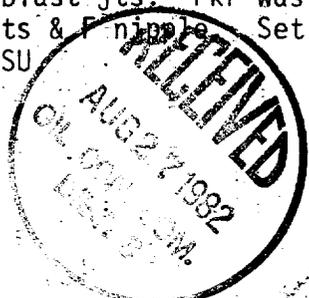
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6602' GR



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.)\*

8/3/82: RIH w/retrieving head. Tagged SD fill @ 4160'. CO top of pkr w/foam. Released retrievable BP. POOH w/tbg & plug. RIH w/tbg, F nipple, pmp out plug, lockset pkr & blast jts. Pkr would not set. Worked 2 hrs. NDBOP, NUWH. RDMOSU.

8/6/82: MIRUSU, NDWH, NUBOP. POOH w/tbg & lockset pkr & blast jts. Pkr was full of paraffin & SD. Change out pkr, RIH w/tbg., Pkr blast jts & F nipple. Set pkr @4247', blast jts across chacra perfs. NDBOP, NUWH. RDMOSU



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Lemise Wilson TITLE Production Analyst DATE August 13, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE ACCEPTED FOR RECORD

CONDITIONS OF APPROVAL, IF ANY:

AUG 26 1982

\*See Instructions on Reverse Side

NMOCC

BY SM