

DEPARTMENT OF THE INTERIOR (Verne Blue)
GEOLOGICAL SURVEY

LEASE DESIGNATION AND SERIAL NO.
SF- 079232

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bolack "B"

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 33, T27N, R8W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

1. OIL ☐ GAS ☒ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

Tenneco oil Company

3. ADDRESS OF OPERATOR

1860 Lincoln St., Suite 1200, Denver, Colorado 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

2250' FNL and 1020' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

6728' GR

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) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETION ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐ Shut in

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☒

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

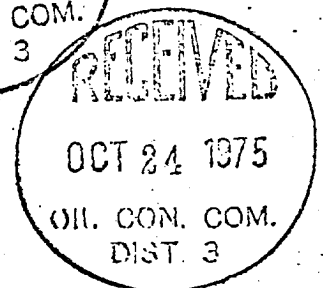
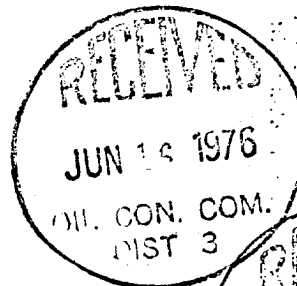
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Status of Well: Shut In

Approximate Date that Temp. Aband. Commenced: 4/75

Reason for Temp. Aband.: Watered out

Future Plans for Well: Review for remedial work



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

SIGNED D. D. Myers

TITLE Div. Production Manager

DATE 10/7/75

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

TEMPORARY ABANDONMENT
EXPIRES 12-31-76

*See Instructions on Reverse Side