

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 081001

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Florance

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Blanco Mesa Verde

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

Sec. 23, T30N, R9W

12. COUNTY OR PARISH 13. STATE

San Juan New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

Suite 1200 Lincoln Tower Bldg, Denver Colo.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

990' F/NL and 1650' F/EL
(Unit Letter B)

14. PERMIT NO.

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

6001 DF

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) Repair casing leak

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

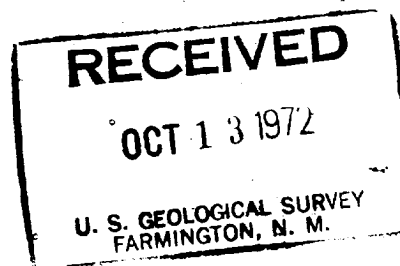
ALTERING CASING

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.)*

Move in service unit, kill well with treated water, rig up B.O.P., Pull 2 3/8" tubing. Clean out to PBTD of 5150'. Run 4 1/2", 10.5#, casing to approximately 4265' with packer shoe. Set packer shoe @ 4265', cement 4 1/2" casing with sufficient volume to circulate and displace an estimated 150-200 sacks through hole in 7" casing. W.O.C. 12 hrs., clean out to TD. Rerun tubing and acidize with 1500 gals. mud clean up acid. Swab well in and test.



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

SIGNED

W L Shaver

TITLE Sr. Production Clerk

DATE 10/10/72

(This space for Federal or State office use)

APPROVED BY

W

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

