

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> P & A Well		5. LEASE DESIGNATION AND SERIAL NO. NM - 024158
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Suite 1200, Lincoln Tower Bldg., Denver, Colorado 80203		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 930' F/NL & 1990' F/EL		8. FARM OR LEASE NAME McKenzie Gas Unit "C"
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5758 GR		10. FIELD AND POOL, OR WILDCAT Basin Dakota
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20, T-30-N, R-12-W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(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 points pertinent to this work.)*

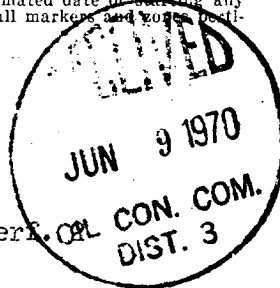
Well to be P & A as follows:

Move in service unit, install BOP.

Kill well with water. Spot lower plugs across Dakota and P. C. Perf. holes 530'. Spot plug in Ojo Alamo.

From	To	No. Sacks Cement	Formation
6523'	6305'	20 sx.	Dakota
1850'	1750'	10 sx.	Pictured Cliff
530'	430'	20 sx. (10 sx squeeze thru perfs)	Ajo Alamo
Surface	-	10 sx.	

Install dry hole marker and clean location



RECEIVED

JUN 8 1970

U. S. GEOLOGICAL SURVEY

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

SIGNED [Signature] TITLE SR. Production Clerk DATE 6/4/70

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

