

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF080244

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 ☐ GAS WELL ☒ OTHER	6. INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR	7. UNIT AGREEMENT NAME
Tenneco Oil Company	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR	Riddle
P. O. Box 1714, Durango, Colorado	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT
1650' FSL 990' FWL	Blanco-Pictured Cliffs
14. PERMIT NO.	11. SEC. T. R. M. OR B.L.R. AND SURVEY OR AREA
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	Sec. 17-T30N-R9W
6105' GR	12. COUNTY OR PARISH
	San Juan
	13. STATE
	N. M.

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 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.)*

8-20-66 Perforated 2 HPF 2802-2808', 2816-2822'. PBTD 2880'.
8-23-66 Frac w/ 30,000 gals. water and 30,000# sand. W.O. test.

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

SIGNED

Harold C. Nichols

TITLE

Senior Production Clerk

DATE

9-9-66

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

*See Instructions on Reverse Side

