

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
P.O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1728' FNL 1565' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input checked="" type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)			

5. LEASE
SF-078316

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Florance

9. WELL NO.
98

10. FIELD OR WILDCAT NAME
Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 6 T30N R9W

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6420' KB

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Having received verbal approval from James Sims, Tenneco, propose to repair a casing leak per the attached detailed procedure.



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Carly H. Johnson TITLE Asst Div Adm Mgr DATE 11/4/80

(This space for Federal or State office use)

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

ok

*See Instructions on Reverse Side

APPROVED
DEC 11 1980
Stephen M...
for DISTRICT ENGINEER

LEASE Florance
WELL NO. 98

8-5/8 "OD, 20 & 24 LB, K-55 CSG. W/ 100 SX
TOC @ Surface

3-1/2 "OD, 9.2 LB, K-55 CSG. W/ 275 SX
TOC @ 2050 (est.)

DETAILED PROCEDURE

1. MIRUSU. Kill well w/1% KCL.
2. RIH w/1-1/4" tbg.
3. Circulate hole clean to PBDT w/1% KCl water.
4. POOH w/tbg.
5. Set CIBP @ 2900 on wireline.
6. Establish rate into leak.
7. Squeeze leak down csg w/250 sx RFC cmt.
8. DO to CIBP w/2-7/8" bit and 1.9" drill pipe.
9. Pressure test csg to 500 psi.
10. DO CIBP. CO to PBDT.
11. POOH w/drill pipe.
12. RIH w/tbg & land @ 2900'.
13. Swab well in.
14. Put on production.

