

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse 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 checked="" type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. SF 078201 |
| 2. NAME OF OPERATOR Tenneco Oil Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 1860 Lincoln St., Suite 1200, Denver, Co. 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 1510' FSL and 2334' FEL Unit J | | 8. FARM OR LEASE NAME Florance |
| 14. PERMIT NO. | | 9. WELL NO. 20A |
| 15. ELEVATIONS (Show whether DF, RT, CR, etc.) 5820' GL | | 10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24, T30N, R9W |
| | | 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 type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input checked="" 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"/> | |

(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.)*

8/24-8/30/76 Drilled 8-3/4" hole to 2820'. Set and cemented 7" casing @ 2820' w/350 sacks of cement. Circulated and waited on cement. Drilled 6-1/8" hole to 4992'. Set and cemented 4-1/2" casing liner from 2586' - 4992' w/275 sacks of cement. Present status = Waiting on completion Unit.

SEP 9 1976

U. S. GEOLOGICAL SURVEY



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

SIGNED D. D. Myer

TITLE Div. Production Manager

DATE 8-31-76

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____