

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  
720 S. Colorado Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1450'FNL & 1520'FEL, Unit G  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐

(other) complete in single zone

SUBSEQUENT REPORT OF

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

RECEIVED  
AUG 2 1979  
U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

5. LEASE

USA-SF-079511-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Gartner

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Blanco Pictured Cliff

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

Sec. 29, T30N, R8W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6190'GL

(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.)\*

This well was intended to be dual completed in the Fruitland and Pictured Cliffs formations. However, electric logs conducted for this well indicated the Fruitland zone to be non-productive. We plan to complete and produce from the Pictured Cliffs formation only.

Subsurface Safety Valve: Manu. and Type

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

SIGNED

*Curley Watkins*

TITLE Admin. Supervisor

DATE

8/21/79

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*W. M. Moll*

APPROVED

DATE

AUG 29 1979

ACTING DISTRICT ENGINEER