

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.)

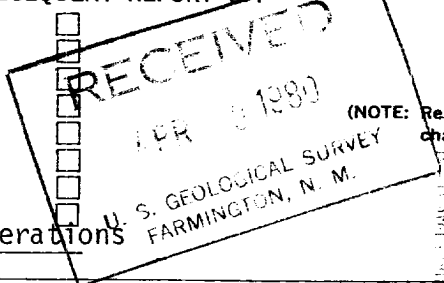
1. oil well ☐ gas well ☒ other ☐
2. NAME OF OPERATOR
Tenneco Oil Company
3. ADDRESS OF OPERATOR
720 S. Colo. Blvd., Denver, CO 80222
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
960'FSL, 1105'FEL, Unit P
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX 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) Report on Drilling Operations

SUBSEQUENT REPORT OF:



(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.)*

3/13-3/24/80

Spudded 13 3/4" hole @ 12:30PM 3/13/80. Ran 198' of 9 5/8", 36# csg & set @ 210'. Cmt. w/225 sxs regular w/3% CACL2. Circ. to surface. Reduced hole to 8 3/4" & resumed drilling. On 3/17, ran 3614' of 7", 23# csg and set @ 3600'. Cmt. w/520 sxs of HowcoLite & 1/4#/sk Flocele. Followed w/150 sxs CLB & 2% CACL2. Circ. to surface. Reduced hole to 6 1/4" & drilled to TD of 7520' on 3/21/80. Ran 597' of 11 6# & 3533' of 10.5#, 4 1/2" csg and set @ 7520'. TOL: 3378'. Cmt. w/475 sxs of 50/50 Pozmix, 4% gel. Circ. to top of liner. Released rig on 3/24/80. WOCU.

Subsurface Safety Valve: Manu. and Type

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

SIGNED Carolyn Hatten TITLE Admin. Supervisor DATE 3/26/80

(This space for Federal or State office use)

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

NM0001