

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 ☐ gas ☒ 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: 990' FNL 1650' FWL "C"
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

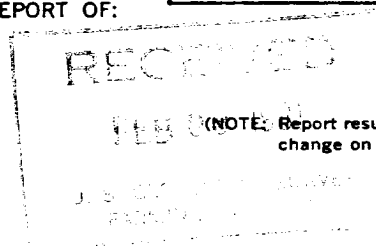
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

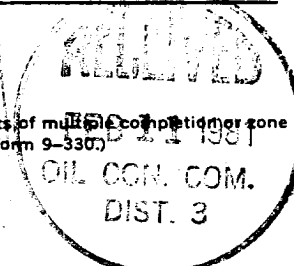
TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

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☐
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(NOTE: Report results of multiple completion 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.)*

11/13/80. MIRUSU, NDWH. NUBOP. TIH w/bit, csg scraper and 2-3/8" tbg. Tagged cmt @ 6834'. Drilled to PBTD @ 6915'. PT csg. to 3500 PSI. for 15 mins. Held OK. Circ'd hole w/1%KCL water. TOH w/tbg. scraper and bit. RU Bluejet and logged well. Perf'd Lower Dakota (1JSPF) as follows: 6874-6906'. TIH w/Mtn. States pkr on tbg. Set pkr @ 6799'. PT pkr. to 2500 PSI. Held OK. Breakdown perfs. Estab rate: 4 BPM @ 4000 PSI. ISIP: 1400 PSI.
1/14/80. Acidized down tubing w/750 gals 15% HCL and 48 Balls. Added 450# salt. Rate: 4 BPM @ 3400 PSI. Ball off @ 5000 PSI. Surged balls off perfs. RU to swab Swabbed 28 bbls gas cut fluid, 18 bbls overload. Final fluid level-gas cut appx. 6200' from surface.

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

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

SIGNED _____ TITLE Asst.Div.Adm.Mgr DATE January 22, 1981

(This space for Federal or State office use)

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

NMOCC

*See Instructions on Reverse Side

BW