1. oil

gas

AT TOTAL DEPTH:

REQUEST FOR APPROVAL TO:

**TEST WATER SHUT-OFF** FRACTURE TREAT

PULL OR ALTER CASING

MULTIPLE COMPLETE CHANGE ZONES

ABANDON\* (other)

SHOOT OR ACIDIZE REPAIR WELL

X

Form Approved.

## UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

|          | Budget Bureau No. 42-R142 |  |  |  |
|----------|---------------------------|--|--|--|
|          | 5.                        | LEASE  |  |  |
|          |                           | SF-078147                                      |  |  |
|          | 6.                        | IF INDIAN, ALLOTTEE OR TRIBE NAME              |  |  |
|          | 7.                        | UNIT AGREEMENT NAME                            |  |  |
| nt<br>   | 8.                        | FARM OR LEASE NAME                             |  |  |
|          |                           | Moore C  |  |  |
|          | 9.                        | WELL NO.                                       |  |  |
|          |                           | 2E   |  |  |
|          | 10.                       | FIELD OR WILDCAT NAME                          |  |  |
|          |                           | Basin Dakota                                   |  |  |
| <br>7    | 11.                       | SEC., T., R., M., OR BLK. AND SURVEY OR AREA   |  |  |
|          |                           | Sec. 26, T32N R12W                             |  |  |
|          | 12.                       | COUNTY OR FARISH 13. STATE San Juan New Mexico |  |  |
| <u> </u> | 14.                       | API NO.  |  |  |
|          | 15.                       | ELEVATIONS (SHOW DF, KDB, AND WD)              |  |  |

ange on Form 9-330.)

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a difference reservoir. Use Form 9-331-C for such proposals.)

well 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 1 below.) 1100' FSL, AT SURFACE: 1550' FWL AT TOP PROD. INTERVAL:

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

6331' gr.

FARMINGION, N. M.

SUBSEQUENT REPORT OF: RECEIVED (NOTE: Report results of multiple completion on to S GEOLDONAL SURVEY

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.)\*

10/10/81 - MIRUSU. RIH w/2-3/8" tbg. POOH w/tbg. Perf'd Dakota. Acidize w/2000 gals 15% HCL and 144 ball slrs @ 30 BPM and 1500 PSI. 10/13/81 - Frac well w/90,000 gals 30# XL-gel and 165,000# 20/40 sand. 10/14/81 - RIH w/tbg and SN. Tagged SD @ 7450'. Landed tubing @ 7457'. NDBOP. NUWH. Kicked well around w/N2. RDMOSU.

| Subsurface Safety Valve: Manu. and Type       | Set @                          | Ft.                              |  |
|---|--------------------------------|----------------------------------|--|
| 18. I hereby certify that the foregoing is to |                                | •                                |  |
| SIGNED Show do F. Terror                      | THILE Production               | Analyst <sub>DATE</sub> 10/19/81 |  |
|   | (This space for Federal or Sta | te office use)                   |  |
| APPROVED BYCONDITIONS OF APPROVAL, IF ANY:    | TITLE                          | ACCEPTED FOR RECORD              |  |

OCT 26 1981

\*See Instructions on Reverse Side

FARMINGTON DISTRICT