| Form | 9-331 | | |
|------|-------|--|--|
| (May | 19631 | | |

U' TED STATES SUBMIT INCOME THE DESCRIPTION OF THE INTERPOSE Other instruction of the Rudget Provided.

| M. I OF THE INTERIOR (Other instruct) | io n re- Budget Bureau No. 42-R14 |
|---------------------------------------|-----------------------------------|
| GEOLOGICAL SURVEY | 5 LEASE DESIGNATION AND SERIAL NO |

| GEOLOGICAL SURVEY | erse stde) | 5 LEASE DESIGNATION AND SERIAL NO. |
|--|---|--|
| SUNDRY NOTICES AND REPORTS ON (Do not use this form for proposals) to drill or to deepen or plug back to Use "APPLICATION FOR PERMIT—" for such proposals. | WELLS a different reservoir. | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| OIL GAS WELL OTHER | | 7. UNIT AGREEMENT NAME |
| 2. MANTE OF OPERATOR TENNECO DIL COMPANY | | MARM OR LEASE NIME |
| 3. ADDRESS OF OPERATOR Box 1031 MIDLAND TEXAS | | WELL NO. |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State re- See also space 17 below.) At surface | quirements.* 1 | O. FIELD AND POOL, OR WILDCAT |
| 660 FAL: 660 FEL SEC 12 TOS R35E UP 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, 4145 GR | ur A | 2 OS 3 SE NOM PM COUNTY OF PARISH 13. STATE |
| 16. Check Appropriate Box To Indicate Nature of | of Notice, Report, or Oth | er Data |
| TEST WATER SHUT-OFF PULL OR ALTER CASING FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS | WATER SHUT-OFF PRACTURE TREATMENT SHOOTING OR ACIDIZING Other) (NOTE: Report results of | REPORT OF: REPAIRING WELL ALTERING CASING ABANDONMENT* Multiple completion on Well |
| 12-5-68 | | peus for an markers and zones perti- |
| RAN 306 JTS 51/2" J-55 ! N-80 | 174 CASING | SET AT 9920'. |
| CEMENTED WITH 185 SX 50-50 | POZMIX IN | 0 LA 500 |
| 75 SX CLASS C" LATEX PLUGT | | |
| TOP CEMENT 8120' | | |
| WOC 24HRS | | |
| TESTED CASING TO 2000# FOR 3 | aminutes 4 | |
| Propage to complete | | |
| | - | |
| 18 I herahy garden that the f | | |
| 18. I hereby certify that the foregoing is true and correct SIGNED TONOLAN. KAWASIN TITLE SO PROP | O CLERK | DATE 12 13-68 |
| (This space for Federal or State office use) | APPROVED | #2. 14. p. 3.0 \$2.34 |
| APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY: | DEO 1 (000 | DATE |

*See Instructions on Reverse Fine DISTRICT ENGINEER

DEC 1 0 1968