Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.: NM 047407

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL [X] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR: TENNECO OIL COMPANY

8. FARM OR LEASE NAME: BATE FEDERAL COM

3. ADDRESS OF OPERATOR: BOX 1031 MIDLAND, TEXAS 79701

9. WELL NO.: 1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FSL & 660' FEL, UNIT I, SEC. 11, T9S, R34E

10. FIELD AND POOL, OR WILDCAT: UNDESIGNATED

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 11-9S-34E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 4219.8 GR.

12. COUNTY OR PARISH: LEA

13. STATE: N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
(Other) RUN CASING			[X]

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.) *

SPUD 3:00PM 1-26-69

1-27-69 DRG 17½ HOLE - RAN 11 JTS 13⅜" 48# CASING SET AT 359'. CEMENTED WITH 375 SX CLASS "H" w/2% $CaCl_2$. P.D. 12:30 AM 1-27-69. CEMENT CIRCULATED. WOC 24 HRS - TEST CASING to 800# for 30 minutes - HELD OK

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

SIGNED [signature] TITLE Sr Prod Clerk DATE 1-31-69

(This space for Federal or State office use)

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

APPROVED
FEB 1969
J. A. GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side