Form 9-301 (May 1963)

SUN

## STATES SEBMIT IN TRIPLICATE. THE INTERIOR (Other Instructions of the content of

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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GEOLOGIA	~ A I	CII	DVE	•

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DRY 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.)

7. UNIT AGREEMENT NAME GAS · WELL WE'L X OTHER NAME OF OPERATOR 8. FARM OR LEASE NAME Tenneco Oil Company Ginsberg Federal

3. ADDRESS OF OPERATOR 9. WELL NO. 1200 Lincoln Tower Bldg., Denver, Colorado 80203

LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.) 10. FIELD AND POOL, OR WILDCAT

1815 FSL and 330 FEL

Justice Blinebry 11. SEC., T., R., M., 02 BLK. AND SURVEY OR ARMA

Sec. 31, T 25S, R 38E 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, ET, GR, etc.) 12. COUNTY OR PARISH | 13. STATE 3048 KB New Mexico 16.

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

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	,	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS		water shot-off fracture treatment shooting or acidizing (Other) Shut-In	REPAIRING WELL  ALTERING CASING  ABANDONMENT*  nultiple completion on Well	X

Completion or Recompletion Report and Log form.) 17. DESCRIBE PROFOSED 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 nones pertinent to this work.)\*

STATUS OF WELL: Justice Blinebry and Justice Tubb Drinkard Shut in.

APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED:

REASON FOR TEMP ABAND:

FUTURE PLANS FOR WELL:

Review for Workover

APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING:

 $G_{i}^{*}G_{i}$ 37

18. I hereby certify that the foregoing is true and correct Division Production Manager (This space for Federal or State office use) APPROVED BY . CONDITIONS OF APPROVAL, IF ANY: