PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other)

## M.O.C.D. COPY

## Form Approved. Budget Bureau No. 42-R1424

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

| ONLIED STATES                                                                                                                                                               | Budget Bureau No. 42-R1424                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| DEPARTMENT OF THE INTERIOR                                                                                                                                                  | 5. LEASE NM-7951                                                                                |
| GEOLOGICAL SURVEY                                                                                                                                                           | 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 Form 9–331–C for such proposals.) |                                                                                                 |
| 1. oil gas                                                                                                                                                                  | 8. FARM OR LEASE NAME Leonard Brothers                                                          |
| 2. NAME OF OPERATOR TENNECO OIL COMPANY                                                                                                                                     | 9. WELL NO.                                                                                     |
| <ul><li>3. ADDRESS OF OPERATOR 6800 Park Ten Blvd., Suite 200 North</li><li>4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)</li></ul>                    | 10. FIELD OR WILDCAT NAME South Leonard Queen  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA |
| AT SURFACE: 1980' FSL & 1980' FWL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:                                                                                                    | Sec. 13, T26S, R37E  12. COUNTY OR PARISH 13. STATE  Lea New Monday                             |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA                                                                                               | 14. API NO.                                                                                     |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:                                                                                                                              | 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3004' GL                                                  |
| FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE                                                                                          | (NOTE: Report results of multiple completion or zone change on Form 0.220)                      |
| THE COMPLETE                                                                                                                                                                | 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.)\*

The Queen was perforated 3377'-3428' W/1JSPF. Well was acidized  $\frac{15\%}{15\%}$ NEFE HCL w/75 ballsealers, and swabbed back to clean up. Fraced w/20,000 gals of Versagel 1400 + CO (50% of each) + 21,200 # of 20-40 sand and 9000 # of 10-20 sand. The well was flowed, swabbed back and put on production. Tested after treatment 60 BO, + 25 BW (Test before treatment: 11 BO + 4 BW (24 hrs.)

| Subsurface Safety Valve: Manu. and Ty   | /pe                                          | FEB 2 5 1081                                  |  |
|-----------------------------------------|----------------------------------------------|-----------------------------------------------|--|
| 18. I hereby certify that the foregoing | is true and correct                          | Set @ Ft.                                     |  |
| SIGNED 1 CUY XICLL                      | TITLE Production Analyst D                   | ATE 2/17/81                                   |  |
| APPROVED BY                             | (This space for Federal or State office use) | ACCEPTED FOR RECORD                           |  |
| CONDITIONS OF APPROVAL, IF ANY:         | TITLE                                        | DATE                                          |  |
|                                         |                                              | FEB 2 3 1981                                  |  |
|                                         | *See Instructions on Reverse Side            | U.S. GEOLOGICAL SURVEY<br>ROSWELL, NEW MEXICO |  |