

SUNDRY NOTICES AND REPORTS ON WELLS

(This form is to be used for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION" OR "PERMIT" for such proposals.)

1. ☒ OIL WELL ☒ GAS WELL ☐ OTHER		7. FIRST AGREEMENT NAME
2. NAME OF OPERATOR Tenneco Oil Company		8. FARM OR LEASE NAME LEONARD FEDERAL
3. ADDRESS OF OPERATOR 720 So. Colorado Blvd., Denver, Colorado 80222		9. WELL NO. 131
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations. See also space 17 below.) At surface 1980' FSL and 660' FWL, Unit L		10. FIELD AND POOL, OR WILDCAT LEONARD QUEEN SOUTH
14. PERMIT NO.		11. SEC. T. R. N. OR BLK. AND SURVEY OR AREA SEC 14, T26S, R37E
15. ELEVATIONS (Show whether DF, RT, CL, etc.) 2992'		12. COUNTY OR PARISH LEA
		13. STATE NM

RECEIVED

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☒
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
KNOCK OUT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐		
FILL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETION	☐	ALTERING CASING	☐
ABANDON*	☐	ABANDONMENT*	☐
CHANGE PLANE	☐		

(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 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.)*

4/17/78 SPUDDED 12 1/4" HOLE @ 5 PM 4/17/78. DRL'D TO 520'. RAN 12 JTS 8 5/8" 24# CSG. SET @ 520'. CMT'D W/500 SX CL C. CIRC 40 BBLs CMT TO SURF: PD @ 10:00 AM 4/18/78.. WOC 8 HRS TESTED TO 1000#. HELD OK. PREPARING TO DRILL OUT CEMENT.

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

SIGNED D. W. Myers TITLE Div. Production Manager DATE 5/3/78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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