

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SEE INSTRUCTIONS ON REVERSE SIDE

5. LEASE DESIGNATION AND SERIAL NO.

NM - 7951

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 ☐ GAS WELL ☐ OTHER
2. NAME OF OPERATOR
Tenneco Oil Company
3. ADDRESS OF OPERATOR
720 So. Colorado Blvd., Denver, Colorado 80222
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface 660' F ~~H~~ and 330' F ~~E~~ Unit A

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Leonard Bros.

9. WELL NO.

28

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 14, T26S, R37E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GK, etc.)

3010' KB

12. COUNTY OR PARISH

Lea

13. STATE

NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

WATER SHUT-OFF

☒
☒
☐

REPAIRING WELL

☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

(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.)

Drld. 7-7/8" hole to 3600'. Ran 81 jts 5-1/2" 15.5# csg.
Cmt. 850 sx lite. Follow w/200 sx class C. Pd 2:30 a.m.
8-1-78. Did not circ. cmt. to surf. Rel. rig 8-1-78

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

SIGNED

Carly J. Walker

TITLE: Administrative Supervisor

DATE

8/10/78

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

