| DISTRIBUTION SANTA FE | NEW MEXICO OIL CONSERVATION COMMISSION | | | Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65 | |
|--|--|--|--|--|--|
| U.S.G.S. LAND OFFICE OPERATOR 3 | ` | | State | Type of Lease Fee. X & Gas Lease No. | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO GRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) 1. | | | | eement Name | |
| OIL X GAS WELL 2. Name of Operator | OTHER- Recompletion | | 8. Form or 1 | Lease Name | |
| Tenneco Oil Company 3. Address of Operator | | | | Whigham | |
| Suite 1200, Lincoln Tow | er Building, Denver, | Colorado 80203 | | 2 nd Pool, or Wildcat | |
| UNIT LETTER P 990 FEET FROM THE SOUTH LINE AND 990 FEET FROM | | | | undesignated Dakota | |
| | 11 TOWNSHIP 17 | | | | |
| 15. Elevation (Show whether DF, RT, GR, etc.) 7108 GR | | | | | |
| Check Ap | | Norman of National Design | McKinle | A /////////// | |
| NOTICE OF INT | propriate Box To Indicate ENTION TO: | | rt or Uther Data EQUENT REPORT | OF: | |
| PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING | PLUG AND ABANDON CHANGE PLANS | commence drilling opns. casing test and cement job other <u>Recomple</u> | | LITERING CASING PLUG AND ABANDONMENT | |
| OTHER | | | | | |
| 17. Describe Proposed or Completed Operawork) SEE ROLE 1703. Well T.A. 3/29/68 - Move squeezed perforations 18 to 500# for 30 min. ok, 2898'-2902' W/10,000# set 18 sand 10, 962 gals oil Swabbed all zones, set 18 2711'-2727'. Tested 24 hrs. 9/2/69 files | ed in completion rig 804-6, 1817-19, 1834, cleaned out to 2916 and 12,516 gals oil. Fraced Upper Dakots bridge plug above mide | 8/20/69, pulled tub 1836, 1838 W/50 sk Fraced lower Dak Fraced middle Dako 2711'-2727' W/10, | ing, set packe s class C, tes ota 2872'-2882 ta 2806'-2820' | r @ 1750', ted squeeze ', 2890-2893', W/10,000 | |
| | | | | en e | |
| | | | - | Design process | |
| | | | 200 | DIST. 3 | |
| 18. I hereby certify that the information ab | ove is true and complete to the best | of my knowledge and halief | | · · · · · · · · · · · · · · · · · · · | |
| SIGNED & A. Jun | | Sr. Production Cler | K DATE S | ept. 5, 1969 | |
| APPROVED BY AULUS COUNTINGS OF APPROVAL, IF ANY: | // | UPERVISOR DIST. #3 | DATE S | | |
| \mathcal{O} | | | | ·• | |