NO. OF COPIES RECEIVED	If			
DISTRIBUTION	+ /	Form C-103 Supersedes Old		
SANTA FE	 	C-102 and C-103		
FILE	2	NEW MEXICO OIL C	ONSERVATION COMMISSION	Effective 1-1-65
U.S.G.S.				30-031-20183 Sa. Indicate Type of Lease
LAND OFFICE	1,			State Fee X
OPERATOR	 / 			5. State Cil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DAILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				
I. OIL GAS WELL X WEL		OTHER-		7. Unit Agreement Name
2. Name of Operator Tenneco Oil (8. Farm or Lease Name SFP-RR			
3. Address of Operator 1860 Lincoln	9. Well No.			
4. Location of Well UNIT LETTER B 800 FEET FROM THE NORTH LINE AND FEET FROM				10. Field and Pool, or Wildcat FROM Lone Pine Dakota A
		13 TOWNSHIP 17		MANA MANAMANA

		15. Elevation (Show whe	ther DF, RT, GR, etc.)	12. County McKinley
Check Appropriate Box To Indicate Nature of Notice, Report or Oth NOTICE OF INTENTION TO: SUBSEQUENT				
٦		1		7
PERFORM REMEDIAL WORK	-	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	-	ſ	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING		CHANGE PLANS	CASING TEST AND CEMENT JOB	Shut In [X]
OTHER		1	OTHER	Shut in [X]
 Describe Proposed or Co work) SEE RULE 1103. 	ompleted	Operations (Clearly state all pertinent	details, and give pertinent dates, inc	luding estimated date of starting any proposed
STATUS OF WEL	.L: D	ual completion: "A" Zo	one SI, "D" active gas	producer
APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED: 11/74				
REASON FOR TEMP. ABAND.: pressure maintenance				
FUTURE PLANS FOR WELL: "D" Zone returned to production 3/20/76				
APPROXIMATE D	DATE 0	F FUTURE W.O. OR PLUGGI	ING:	
		s producing gas in a di #12. Because of unitiz		
1/	,-			RELEIVED
1/			/	HIN 1 / 1076
15	,	() (1 l+ (JUN 1 4 1976
	لے			OIL CON. COM.
V				DIST 3
18. I hereby certify that the	informati	on above is true and complete to the b	est of my knowledge and belief.	
• • • • • • • • • • • • • • • • • • •	, . ,		n. n	
SIGNED	<u> </u>	TITLE	Div. Prod. Manager	DATE <u>6-9-72</u>
Original Signa	d ly		المراجع والمنافية المنافية الم	DATE
APPROVED BY		TITLE		DATE

CONDITIONS OF APPROVAL, IF ANY: