

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-05791	
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 3249, Englewood, CO 80155		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 790' FSL, 1450' FWL		8. FARM OR LEASE NAME Dawson A	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6740' GR		10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T27N, R8W	
		12. COUNTY OR PARISH San Juan	
		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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input checked="" type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)

8/22/85 RIH w/pkr. Set pkr @ 4784'. Put 500 psi on BS. Etab inj into form @ 4.5 BPM & 2000 psi. Acidize form w/900 gals of 15% weighted HCl & 54 - 1.1 S.G. ball slrs. Acidized @ 5 BPM & 2000 psi. Good ball action. Complete balloff. Swab well. Make 7 runs & swab to SN. No drilling mud evident. Release pkr & RIH & knock balls off perfs. POOH w/tbg. Frac dn csg w/slick water & 20-40 sd as follows:

VOL (GAL)	SAND CON. (#/GAL)	RATE/BPM	PRESS/PSI
13,900	0	25.5	2,000
6,600	1/2	25.2	1,950
6,600	1.0	25.0	1,825
6,600	1.5	26	1,810
12,600	2	29	1,900
		17	1,800

Dropped to:

Screened out 2/40,538# in formation.
AIR = 25 BPM AIP = 1900 psi
ISIP = 1350; 5 MIN = 800; 15 min - 750 psi.

RECEIVED
SEP 03 1985
OIL CON. DIV.
DIST. 3

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

SIGNED Scott McKinnis TITLE Senior Regulatory Analyst DATE 8/26/85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE AUG 30 1985

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.