



*copy of report  
to be filed*

January 3, 1975



*0.9 1/2*

State of New Mexico  
Oil Conservation Commission  
1000 Rio Brazos Road  
Aztec, New Mexico 87410

Attention: Mr. Emery Arnold  
Supervisor

Re: Casing Failure  
Bolack "A" No. 1  
(B-2-27N-11W)  
San Juan County

Dear Mr. Arnold:

This is in reply to your letter dated December 24, 1974. Our Federal Sundry Report #9331 for this well was misleading in that it did not show recent activity or present plans for this well.

A well service unit was moved onto the well on August 7, 1974, to conduct work as outlined on Form #9331 dated August 12, 1974. This work was approved by the USGS but with comment in their letter dated August 15, 1974, that the procedure outlined would not be satisfactory for a permanent solution. While working on the well, the tubing was pulled and was found to have five bad joints. The joints were replaced, the Baker Model "D" seal assembly was redressed and the tubing string was hydrotested as it was being run into the hole. Subsequent swab tests of the Dakota ending September 13, 1974, were inconclusive. We are presently attempting to obtain a new gas contract which would allow additional expenditure on the well to avoid having to plug and abandon.

An answer on our inquiry concerning the gas contract is expected very soon. At that time, we will either plug and abandon or repair the casing leak and attempt to restore the well to economic status from the Dakota zone. In either event, we will seek your approval of our proposed procedure.

Yours very truly,

TENNECO OIL COMPANY

J. L. Gaskill  
Division Production Engineer

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form Approved  
Budget Control No. 42-R1424

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 <input type="checkbox"/>		5. LEASE DESCRIPTION AND SERIAL NO. <b>SE 072302-A</b>																				
2. NAME OF OPERATOR <b>Tenneco Oil Company</b>		6. IF INDIAN, AGENCY AND TRIBE NAME																				
3. ADDRESS OF OPERATOR <b>1200 Lincoln Tower Bldg., Denver, Colorado 80203</b>		7. UNIT AGREEMENT NO.																				
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>790 FNL / 1750 FFL</b>		8. FARM OR LEASE NO. <b>BOBACK</b>																				
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.) <b>5930 GR</b>	9. WELL NO. <b>1</b>																				
18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR MEDIAN <b>KUTZ GALLOP</b>																				
<table border="0"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>TEST WATER SHUT-OFF <input type="checkbox"/></td> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>WATER SHUT-OFF <input type="checkbox"/></td> <td>REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALIASING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT* <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td>(Other) <u>Shut-In</u></td> <td></td> </tr> </table>		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 type="checkbox"/>	FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALIASING CASING <input type="checkbox"/>	SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>	REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Shut-In</u>		11. SEC. T., R., M., S. AND SURVEY OR ALIAS <b>SEC 2, T20N, R11W</b>
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 type="checkbox"/>																			
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALIASING CASING <input type="checkbox"/>																			
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REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Shut-In</u>																				
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.)* <b>DUAL WELL DAKOTA &amp; GALLOP DAKOTA PRODUCING</b>		12. COUNTY OR PARISH OR STATE <b>SAN JUAN N.M.</b>																				

STATUS OF WELL:

**GALLOP SHUT-IN**

APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED:

REASON FOR TEMP ABAND: **Reserves Depleted**

FUTURE PLANS FOR WELL: **This well will be abandoned when the Dakota zone is depleted.**

APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING: **N/A**

This document is a duplicate of the original record of the well log. It is not to be used for legal purposes. The original record is the only authoritative source of information regarding the well log.

~~Note: Producing from Dakota~~

18. I hereby certify that the foregoing is true and correct  
SIGNED W.D. Myers TITLE Division Production Manager DATE December 13, 1974

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved  
by the Bureau of Land Management No. 42-R1424.

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 type="checkbox"/> OTHER		7. UNIT AGREEMENT NO.
2. NAME OF OPERATOR Tenneco Oil Company		8. FARM OR LEASE NO. BOLACK A
3. ADDRESS OF OPERATOR 1200 Lincoln Tower Bldg., Denver, Colorado 80203		9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  790 FNL : 1750 FEL		10. FIELD AND POOL, OR FIELD CAT BASIN DATA
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, FT, GR, etc.) 5950 GR	11. SEC., T., R., OR COR. AND SUBV. OR ALIA B
		12. COUNTY OR PARISH 13. STATE SAN JUAN N.M.

18. 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 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 type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Shut-In	<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion or 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.)\*

STATUS OF WELL: SHUT-IN

APPROXIMATE DATE THAT TEMP. ABAND. COMMENCED: March, 1974

REASON FOR TEMP ABAND: Casing leak

FUTURE PLANS FOR WELL: Repair casing leak

APPROXIMATE DATE OF FUTURE W.O. OR PLUGGING: June, 1975

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

SIGNED W.D. Myers TITLE Division Production Manager DATE December 13, 1974

(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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