Form 3160-5

(This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY

## UNITED STATES

SUBMIT IN TRIPLICATES (Other instructions on re-

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

Former (2: 331)  DEPARTMENT OF THE INTERIOR verse side)  BUREAU OF LAND MANAGEMENT			5. LEASE DESIGNATION AND SERIAL NO. NM-003459	
CUNDRY NO	TICES AND REPORTS ( possils to drill or to deepen or plug lication for PERMIT—" for such p	ON WELLS /	6. IF INDIAN, ALLOTTER OR TRIBE NAME	
OIL GAB V	R	ECEIVED	7. UNIT AGREEMENT NAME	
WELL WELL OTHER			S. PARM OR LEASE NAME	
Tenneco Oil Company		DEC 0 9 1985	Florance C LS	
3. ADDRESS OF OPERATOR	2011	A#411 a.m	9. WELL NO.	
P. O. Box 3249, Eng	lewood, CO 80155 BUR n clearly and in accordance with and	REAU OF LAND MANAGEMENT	10. FIELD AND POOL, OR WILDCAT	
4. LOCATION OF WELL (REPORT IOCATIO See also space 17 below.) At surface	n clearly and in accordance with any	a manager regists best properties of the Principles	Blanco MV/Basin DK 11. sbc., T., B., M., OR BLK. AND SUSYNY OR ARBA	
790' FSL, 1900' FEL				
	15. ELEVATIONS (Show whether D	T PT CP eta \	Sec. 30, T28N R8W	
14. PERMIT NO.		r, mr, qm, ecc.,	San Juan NM	
	63681 GL	(A)		
16. Check	Appropriate Box To Indicate I			
NOTICE OF IN	TENTION TO:		QUENT BEFORT OF:	
TEST WATER SHUT-OFF  PRACTURE TREAT  SHOOT OR ACIDIZE  REPAIR WELL  (Other)	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS	! Completion or Recom	ts of multiple completion on Well pletion Report and Log form.)	
proposed work. If well is dire	ectionally drined, give subsurface loc	buttons and meagaired and tree vers	s, including estimated date of starting any cal depths for all markers and sones perti-	
10/30/85 MIRURT. S K-55 STC csg set @ 2 cmt PD 5:30 a.m. 10/	Spud well @ 7 pm.m Dr 290. Cmt w/250 sx CL- /31/85.	ill to 290 RU & ran / B + 2% CaCl2 + 1/4#/s	x flocele. Circ 10 bbls	
10/31/85 NUBOPE. F	PT all BOPE to 1000#,	30 min, o.k. Drill a	head.	
	949. Lost circ.			
4991. Drl blind to bbls 70% qual hudra	circ & fill hole @ 27 4999! TFB. POOH. R lite, 150 sx (435CF) B @ 4 p.m. POOH. WOC & I RTNS. Tag top cmt s	foamed to 6.8 PPG.	Tail w/50 sx (59CF) Fill hole w/45 bbls mud.	
Mix mud, attempt to foam cmt.	t stringer lost 90% RT build vol. No good.	Clean out to 4999.	KIH UE to 4007. Fump	
sx (59CF) B neat.	qz #2 @ 4807 pmp 150 s CIP @ 6:45 a.m. Well	x (435C <b>F</b> ) B foamed to flwg N2. PU kelly &	o 6.8 PPG. Tail w/50 pmp dwn DP. Mix mud	
18 I hereby certify that the foregoin	ng is tráe and correct			

TITLE Senior Regulatory Analyst

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. MODELLA

Form 3160-5 November 1983) Formerly 9-331)

## UNITED STATES BUBMIT IN TRIPLICATE\* (Other Instructions on rerereperpartment of the interior verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

REAU OF LAND MANAGEMENT	NM-00345
	& IN IMPLIAN ALLOW

	6. IF INDIAN, ALLOTTEE OR TEIBE NAME		
SUNDRY (Do not use this form for Use "A			
OIL GAR [	RECEIVED	7. UNIT AGREEMENT NAME	
2. NAMB OF OPERATOR	DEC 0 9 1985	8. PARM OR LEASE NAME	
Tenneco Oil Company		Florance C LS	
B. ADDRESS OF OPERATOR	BUREAU OF LAND MANAGEMENT	9. WELL NO.	
P. O. Box 3249. En	ralewood CO 80155 FARMINGTON RESOURCE AREA	10M	
See also space 17 below.) At surface	cation clearly and in accordance with any State requirements.	Blanco MV/Basin DK  11. SBC., T., B., M., OR BLE. AND SURVEY OR AREA	
790' FSL, 1900' FEL	-	Sec. 30, T28N R8W	
14. PERMIT NO.	15. BLEVATIONS (Show whether DF, BT, GR, etc.)	12. COUNTY OR PARISE 13. STATE	
	6368' GL	San Juan NM	

6. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO:					
LL OR ALTER CASING  LITIPLE COMPLETE  ANDON®  ANGE PLANE	WATER SHUT-OFF  FRACTURE TREATMENT  SHOOTING OR ACIDIZING  (Other) Progress report  (Note: Report results of mult	ALTERING CASING ABANDONMENT®			
	ON TO:  LL OR ALTER CASING  LTIPLE COMPLETE	ON TO:  LL OR ALTER CASING LTIPLE COMPLETE ANDON*  ANGE PLANS  SUBSEQUENT REI WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING Progress report			

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 sones pertinent to this work.)\*

11/9/85 Continued w/25% LCM. WOC. TIH to 1200. Fill backside. Circ stage in hole to 4504 & tag cmt. Drl out soft cmt & stage to 4876 w/full RTNS @ 6:00 a.m.

11/10/85 Drl out cmt to 4968. Lost 50% RTNS on conn. Drl w/50% RETNS, bldg vol w/30% LCM. Crl lost circ, WO RTNS.

11/11/85 TIH w/DP to 5096. RU Howco. Cmt w/50 sx CL-B + 2% CaCl2 & 150 sx B neat. Tailed w/50 sx 10:2 THIX. TOH 22 STNDS. Pmp open plug catcher & fill hole. TOOH. WOC. Build vol. TIH to 2604. Circ & cond. TIH, tag cmt @ 5000. Drl cmt (Green-Soft). Lost 225 BBLS mud past 24 hrs.

11/12/85 Regain full RTNS. Drl to 5400 w/full RTNS. Circ & cond. Short trip. Circ & cond for logs. TOOH for logs. RU gearhart. RIH. 1st tool stopped @ 4950. TIH w/DP.

11/13/85 RU gearhart Run GR-SP-DLL fr 5400-290 & CDL-CNL-CAL fr 5400-290. TIH, Staging to btm. C&C POOH, LDDP & DC. Change rams RU to run csg.

11/14/85 Ran 128 jts (5384') 7" 23# K-55 STC csg to 5388. Shoe @ 5388, FC @ 5344, DV @ 4741 & DV @2088. 1st stage; pmp 106 sx (125CF) CL-B w/2% Cacl2 & 1/4# flocele. No press, no RTNS. CIP @ 3:05 p.m. 2nd stage; pmp 517 sx (951CF) lite wt w/2% CaCl2 & 1/4# flocele + 100 sx CL-B (118CF) w/2% CaCl2 & 1/4# flocele. Lost RTNS. CIP @ 8:21 pm.

8. I hereby certify that the foregoing is true and correct  SIGNED WITH METERS OF THE SIGNED		r Regulatory Analyst DATE 12-3-85
(This space for Federal or State office use)  APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	OIL CONT. DIV.

\*See Instructions on Reverse Side ALBUQUE ROLL COPY

Form approved. Budget Bureau No. 1004-0135

form 3100-5		Other instructions on re Expires August 31, 1985
November 1,383) Formerly 9-331)	DEPARTMENT OF THE INTERIOR	erse side) 5. LEASE DESIGNATION AND SERIAL NO.
ronnerry 9-331)	BUREAU OF LAND MANAGEMENT	/ NM-003459
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
CLIN	IDRY NOTICES AND REPORTS ON \	WELLS /
(Do not use this	form for proposals to drill or to deepen or plug back to Use "APPLICATION FOR PERMIT—" for such passociate	a different reservoir.
(50 20: 40:	Use "APPLICATION FOR PERMIT-" for such passons.	EIVED 7. UNIT AGREEMENT NAME
i.		7. UNIT AGREEMENT NAME
OIL GAS	XX OTHER	2 0 0 100E
2. NAME OF OPERATOR	JE.	3 0 9 1985 B. PARM OR LEASE HAME
Tenneco 0il Co	ompany	Florance C LS
S. ADDRESS OF OPERATO		LAND MANAGEMENT 9. WELL NO.
P 0 Box 3249	9. Fnlgewood, CO 80155 FARMINGT	ON RESOURCE AREA 10M
4. LOCATION OF WELL (	Report location clearly and in accordance with any State r	equirements.* 10. FIELD AND POOL, OR WILDCAT
See also space 17 bel	OW.)	Blanco MV/Basin DK
		11. gBC., T., R., M., OR BLK. AND SURVEY OR AREA
7001 EC1 100	01 FF1	BUEVS! OF ALSA
790' FSL, 190	J FEL	Sec. 30, T28N R8W
14. PERMIT NO.	15. BLEVATIONS (Show whether DF, BT, GR,	
14. PERMIT NO.		San Juan NM
	6368' GL	1 San Juan   Mil
16.	Check Appropriate Box To Indicate Nature	of Notice, Report, or Other Data
	NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-	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) Progress report (Norm: Report results of multiple completion on Well
(Other)		Completion or Recompletion Report and Log form.)
nent to this work.)		is, and give pertinent dates, including estimated date of starting and discussion measured and true vertical depths for all markers and sones perti-
11/14/85 (co & 1/4# flocel	ntinued) Regained RTNS. 3rd stag e + 50sx (59CF) CL-B w/2% CaC12 +	e; 800 sx (1472CF) lite wt-3 w/2% CaCl2 1/4# flocele. Good circ. CIP @ 2 a.m.
·		L LICE Day out DV tool Press tst

11/15/85 Press tst blind rams, 1500, 30 min. o.k. WOC. Drl out DV tool. Press tst pipe rams & csg, 1500, 15 min, o.k. Unload hole. Drl & dry hole to 5446.

11/16/85 Circ. Drl & surv to 6140.

11/17/85 Blow hole & cond foam. Drl to 6900 @ 6 a.m.

11/19/85 Ran GR-DLL from 7125-5388. Ran GR-CDL-CNL-CAL from 7115-5388. RD gearhart. RIH wash 45' to btm. Blow hole, POOH, LDDC's. RU & attempt to run 4-1/2" csg. WT indicator brike, WO parts. Tag fill @ 6990, washed dn 15' w/foam mist. Head cracked on mist pmp, unable to inject foam, hole getting tite. Chain out of hole & LD liner hanger & csg. Rep mist pmp.

11/20/85 RIH to 6936. Break circ w/foam mist & circ. Wash 90' to W/firm fill. Work extremely tite hole. Mix mud & LCM. Fill DP, plug bit, unable to unplug. Pmp 400 bbls dwn backside. Did not fill hole.

Press to 2600. 11/21/85 Work tite hole. Pull 180,000#. SI. C&C mud. 18. I hereby certify that the foregoing is true and correct TITLE Senior Regulatory Analys SIGNED (This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY: \*See Instructions on Reverse Side

Form 3160-5 November 1983)	UNITED STATE DEPARTMENT OF THE	ES	SUBMIT IN TRIPLICATE (Other instructions on re	Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985
Formerly 9-331)	BUREAU OF LAND MANA		verse side)	
SUN (Do not use this	IDRY NOTICES AND REP	ORTS ON	WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS	TM		CEIVED	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	LA OTHER		DEC 09 1985	S. PARM OR LEASE HAME
Tenneco Qil Co				Florance C LS
P. O. Box 3249	Englaward CO 90155		OF LAND MANAGEMENT	10M
4. LOCATION OF WELL ( See also space 17 bel At surface	Report location clearly and in accordance (ow.)	e with any State	requirements.	Blanco MV/Basin DK
790' FSL, 1900	)' FFI			11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA
790 131, 1900	, 166			_Sec. 30, T28N R8W
14. PERMIT NO.	15. BLEVATIONS (Show	whether DF, RT, G	R, etc.)	12. COUNTY OR PARISH 18. STATE  San Juan NM
	6368' GL	1 Al	<b></b>	1 0011 00011
16.	Check Appropriate Box To Involve of Intention to:	ndicate Naturi	•	Other Data
TEST WATER SHUT-C	PULL OR ALTER CASING MULTIPLE COMPLETE		WATER SHUT-OFF FRACTURE TREATMENT	REPAIRING WELL ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*		SECOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS		(Other) Progress	
(Other)	- court man open move (Clearly state	all postingut date		ts of multiple completion on Well pletion Report and Log form.) s, including estimated date of starting any cal depths for all markers and sones perti-
pipe, unable to	l into 7" csg. Circ. F to circ. Ran free pt. back off @ 5722, no suc 92. Pull string shot.	Free @ 572 cess. Pul	22. Pull free pt. Il string shot, R	RIH w/string shot. Work IH w/string shot #2.
@ DCS RIH. (	ew into fish @ 5692. Ja C&C mud. Ream to 5930. mud 45 VIS +20% LCM. Pm	Circ btms	s up RIH to $7140$ ,	" csg. POOH LD fish tools work pipe & circ. Pull t to fill backside, No
11/24/85 Bld Stage in hole Ream tite spo	. Wash & ream to 7140.	ckside, att Circ, sho	tempt to circ, no ort trip 10 STNDS	success. Lost 300 bbl. . Tite hole @ 6851.
11/26/85 Wash	& ream fr 6880-7020.	Circ & con	d. Circ & cond.	TOOH, RU & PU 4-1/2" liner.
			<u>-</u>	Philadelphia
81GNED WILL	the foregoing is frue and correct  TI	TLE Senio	r Regulatory Anal	MSt DATE 12/3/85
(This space for Fede	eral or State office use)	- <u> </u>		DEC 1
ADDROTED RV	का	TLE	(	OH 24 1985
APPROVED BY CONDITIONS OF A	PPROVAL, IF ANY:			TON A

\*See Instructions on Reverse Side

I.  OIL GAS WELL X  2. NAME OF OPERATOR  Tenneco Oid Compa 3. Address of Operator  P. O. BOX 3249 4. LOCATION OF WELL (Repose also space 17 below.	DEPARTME BUREAU RY NOTIC TO PROPORTE OTHER  NY Englewood out location clea	NITED STATES ENT OF THE IN OF LAND MANAGE ES AND REPO to drill or to deepen o on FOR PERMIT—" fo	EMENT  RTS ON W  IT plug back to a  T supplied to a  BUREAU OF  FARMINGT	CO 9 1985	Expires Augustic Strate Designation NM-003459 6. IF INDIAN, ALLOT 7. UNIT AGREEMENT 8. FARM OR LEASE B Florance 9. WELL NO. 10M 10. FIELD AND POOL	THE OR TRIBE NAME  THE OR TRIBE NAME  C LS
790' FSL, 1900' F		15. ELEVATIONS (Show wh	nether DF, NT, GN, e	te.)	Sec. 30.	T28N R8W
16.	Check Appr	6368' GL opriate Box To Indi	cate Nature o	of Notice, Report, or		NIVI
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	ABA CH/	L OR ALTER CASING LTIPLE COMPLETE NDON® INGE PLANS	a (	RACTURE TREATMENT HOOTING OR ACIDIZING Other)  (NOTE: Report result of the property of the pro	alts of multiple completion by the completion between the completion	CASING MENT*  Don on Well form.)
11/27/85 Ran 161 Land @ 7137, FC @ fluid loss add. rtns. POOH. LDD	9 7092, TO PD @ noon	∣ 0 5211. Cmt	t liner w/: rtns when o	160 sx (294CF)	65:35 PUZ 6% 9	jei + .0%
18. I hereby certify that the	e foregoing is k	THE and correct	љ <u>Se</u> nior R	egulatory Anal	yst DATE 73	13/8-5-
(This space for Federal	or State office	use) Titl	Æ		DEC 1 1 IS	v5 <u> </u>
CONDITIONS OF APPI	ROVAL, IF ANY				D/37-3	

See Instructions on Reverse Side

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