

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF-079938
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 3249, Englewood, CO 8015		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 1750' FSL, 1090' FWL		8. FARM OR LEASE NAME Jones
14. PERMIT NO.		9. WELL NO. 3
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6477' GL		10. FIELD AND POOL, OR WILDCAT Blanco P.C.
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T29N R9W
		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 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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Well Test for P & A <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.) \*

9/23/85 MIRUSU. NDWH. NUBOP's. TOH laying down 1-1/4" tbg. 360' of tbg were completely plugged off with paraffin. Well unloading gas and liquid while tripping out of hole. RIH w/2-3/8" tbg, w/SN 1 jt off bottom. Set tbg @ 3001' KB. Hot oil csg tbg annulus w/ 70 bbls wtr to melt paraffin.

9/24/85 SICP = 10 psi upon arrival. Swab well. Hit fluid level at 1800' on initial run. After 12 runs swabbed dry. Shut down well for 1 hr. Make 3 swab runs. Tbg was dry after 2nd run. Csg pres. built to 50 psi. Made 2 swab runs. Tbg was dry after 2nd run. Left well shut in overnight.

9/25/85 25 psi SCIP on arrival; 0 psi SITP. FL @ 2040'. Made 4 swab runs, swab dry on last 2 runs. LD 2-3/8". RIH w/1-1/4" tbg & land @ 2965'. NDBOP & NUWH. RDMOSU.

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

SIGNED <u>Shirley M. King</u>	TITLE Senior Regulatory Analyst	DATE 9/30/85
(This space for Federal or State office use)		ACCEPTED FOR RECORD
APPROVED BY _____	TITLE _____	DATE OCT 03 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.

FARMINGTON RESOURCE AREA

BY Smm