

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 <input type="checkbox"/>		2. NAME OF OPERATOR Tenneco Oil Company		3. ADDRESS OF OPERATOR P.O. Box 3249, Englewood, CO 80155		4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1190' FSL, 2130 FEL		5. ELEVATIONS (Show whether DF, RT, GR, etc.) 5698' GR		6. LEASE DESIGNATION AND SERIAL NO. SF-080245		7. IF INDIAN, ALLOTTEE OR TRIBE NAME	
8. FARM OR LEASE NAME Hamner		9. WELL NO. 11		10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde		11. SEC., T., R., N., OR BLK. AND SURVEY OR AREA Sec. 20, 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 type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	(Other) <u>Recompletion</u>	(Note: Report results of multiple completion on Well Completion or Recombination Report and Log form.)		
(Other)	<input type="checkbox"/>						

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.)

05/18/84: MIRUSU. NDWH. NUBOP. POOH w/tbg & sd.

05/21/84: Spotted 500 gal of 7-1/2% HCl across perfs. Perf'd 2 JSPF 4521-26,4433-41, 4409-15,4179-81,4063-69,4028-32. Acidized w/1250 gal 15% HCl & 114 balls. Frac'd w/97,500 gal slick wtr & 95,000# 20/40 pad 80 BPM @ 400 psi.

05/22/84: Press tst plug to 3500 psi. Held o.k. PU & spot 500 gals of 7-1/2% DI HCL @3886'. Perf Cl'ffhouse Mesaverde w/2 JSPF fr 3847' to 86'.(39, 78 holes). Acidized w/1000 gals 15% wgt'd HC'. Frac'd well w/100,000 gals of slick wtr w/friction reducer & 98,000#'s 20/40 sd. Well treated @80 BPM & 1475 psi. ISIP = 800.

05/26/84: Tag sd fill @ 3750'. CO to RBP w/foam. Latched onto BP. POOH w.tbg & BP. RIH w/tbg & S/N CO to Model D prod pkr @ 3550'. PU, landed tbg @ 4351' btm tbg. RDSU. NDBOP. NUWH. Kicked well around w/N₂ 5560'

RECEIVED

JUN 12 1984

OIL CON. DIV.
DIST. 3

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

SIGNED

Scott McKinnis

TITLE Senior Regulatory Analyst

DATE 5/31/84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JUN 08 1984

NMOCC

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY *CSB*