## UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

SUNDRY NOTICES AND REPORTS ON WELLS

|    | Budget Bureau No. 42-R1424  |  |  |
|----|---|--|--|
|    | 5. LEASE  |  |  |
|    | SF-078385   |  |  |
|    | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME  |  |  |
| _  |   |  |  |
|    | 7. UNIT AGREEMENT NAME  |  |  |
| nt |   |  |  |
|    | 8. FARM OR LEASE NAME   |  |  |
|    | Florance  |  |  |
|    | 9. WELL NO.   |  |  |
|    | 105   |  |  |
|    | 10. FIELD OR WILDCAT NAME   |  |  |
|    | Blanco Picture Cliffs   |  |  |
|    | 11. SEC., T., R., M., OR BLK. AND SURVEY OR                                 |  |  |
| 17 | AREA  |  |  |
|    | Sec. 23; T30N; R8W  |  |  |
|    | San Juan New Mexico   |  |  |
|    | 14. API NO.   |  |  |
| E, | 14. ATT 10.   |  |  |
| -, | 15. ELEVATIONS (SHOW DF, KDB, AND WD)                                       |  |  |
|    | 6153'KB, 614Z.55  |  |  |
|    | (NOTE: Report results of multiple sampletion or zone change on Form 9-430.) |  |  |

| SUNDRY NUTICES AND RELOTES ON WELLS   |  |
|---|--|
| (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)  | 8. FARM OR LEASE NAME  |
|   | Florance   |
| 1. oil gas XX other   | 9. WELL NO.  |
| 2. NAME OF OPERATOR   | 105  |
| Tenneco Oil Company   | 10. FIELD OR WILDCAT NAME  |
| 3. ADDRESS OF OPERATOR  | Blanco Picture Cliffs  |
| 720 S. Colo. Blvd., Denver, CO 80222  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR  |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17  | AREA   |
| h alaur X   | Sec. 23; T30N; R8W   |
| AT SURFACE: 990'FEL, 990'FSL  | 12. COUNTY OR PARISH 13. STATE   |
| AT TOP PROD. INTERVAL:  | San Juan New Mexico  |
| AT TOTAL DEPTH:   | 14. API NO.  |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,   |  |
| REPORT, OR OTHER DATA   | 15. ELEVATIONS (SHOW DF, KDB, AND WD)  |
| REPORT, OR OTHER DAMA   | 6153 'KB, 6147-51  |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  | 6193 KD - 1147-111   |
| TEST WATER SHUT-OFF   |  |
| FRACTURE TREAT  |  |
| SHOOT OR ACIDIZE  | To the little of |
| REPAIR WELL   | (NOTE: Report results of multiple completion or zone   |
| PULL OR ALTER CASING  | change on Form 9-330.)   |
| MULTIPLE COMPLETE   | \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\   |
| CHANGE ZONES  | 3 %  |
| (other)   |  |
|   |  |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statistical including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertine | nifectionally diffied. Five subsurface locations and   |
| 3/15-5/9/80   |  |
|   | zed PC & Fruitland perfs w/50 sx   |
| $a_{1}$ and $b_{2}$ and $a_{1}/2\%$ CACL2 dn $3.1/2\%$ CSG. Lest (  | esa ta 3000 PSI. Peri u iaimingto  |
|   | IN MILA A ID DAIL SCAICIS. DIN   |
| COORCE AID-2 O DDM & 1000 DST ISIVERUL P  | SI. BIEW WELL DOWN & FUUL W/ UPS .   |
| 4 Fig. 14 Farmington CD w/25 Q00 dal 70% dua  | 11TV TOAM CARRING SULUCUM 10/20 S  |
| and an able ATD A1EA DCT Chief in WAll table  | NUE AUE TASI: 1117-173 F314  |
| SICP-583, Q=747 MCFPD, CAOF-1152 MCFPD, 3 h   | r FTP 43 psi, 3 hr CP-364 PSI.[1]b   |
| parted at TOP tbg string.   |  |
| parted at 10r thy string.   | and the second s |
|   |  |
|   | and the second of the second o |
|   |  |
|   | Set @ Ft   |
| Subsurface Safety Valve: Manu. and Type   | 36t W  |
| 18. I hereby certify that the foregoing is true and correct Asst. Div. Admin M  | anager 9/4/80  |
| (This space for Federal or State of   |  |
| 7   |  |
| APPROVED BY IIILE CONDITIONS OF APPROVAL, IF ANY:   | ACCEPTED FOR RECORD  |
|   | THOUSE THE LOSS SECTIONS   |

\*See Instructions on Reverse Side

NMOCC

SEP 24 1980

FARMINGTON DISTRICT