

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESV. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR Tenneco Oil Company						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 720 S. Colorado Blvd., Denver, CO 80222						8. FARM OR LEASE NAME Florance	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 950'FSL, 805'FEL, Unit P At top prod. interval reported below At total depth						9. WELL NO. 117	
14. PERMIT NO.						13. STATE New Mexico	
DATE ISSUED						12. COUNTY OR PARISH San Juan	
15. DATE SPEUDED 12/26/79		16. DATE T.D. REACHED 1/2/80		17. DATE COMPL. (Ready to prod.) 2/1/80		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5731'GL	
19. ELEV. CASING HEAD		20. TOTAL DEPTH, MD & TVD 6750'		21. PLUG, BACK T.D., MD & TVD 6668'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6451'-6663' (Dakota)		25. WAS DIRECTIONAL SURVEY MADE yes		26. TYPE ELECTRIC AND OTHER LOGS RUN GR-Ind. GR-Density	
27. WAS WELL CORED no		28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
9 5/8"		36#		234'		13 3/4"	
7"		23#		3497'		8 3/4"	
4 1/2"		10.5#		6680'		6 1/4"	
29. LINER RECORD		30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number)			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
4 1/2"		3330'		6680'		430 SXS	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
6451'-6663'		1500 gal 15% HCL		83000 gal 1% KCL water			
		78700# 20/40 sand		25800 10/20 sand			
33.* PRODUCTION		DATE FIRST PRODUCTION 2/18/80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing		WELL STATUS (Producing or shut-in) shut-in	
DATE OF TEST 2/17/80		HOURS TESTED 3		CHOKE SIZE 3/4		PROD'N. FOR TEST PERIOD —→	
FLOW. TUBING PRESS. 248		CASING PRESSURE 538		CALCULATED 24-HOUR RATE —→		OIL—BBL. AOF=3788	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented		35. LIST OF ATTACHMENTS two copies of electric logs forwarded by Schlumberger		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED Carly Statton		TITLE Admin. Supervisor		DATE 2/20/80			

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on Items 22 and 24, and 33, below regarding separate reports for separate completions.

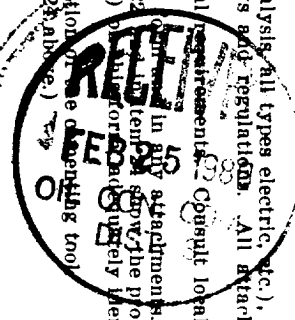
If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see Item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form. Indicate in any attachments, items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22. Indicate the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)



37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORDED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, CUSHION (REQ. TIME TOOL, OPEN, FLOWING, AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Cliffhouse	3840	3880	Sand, Gas	Greenhorn	6318	
Menefee	3880	4390	Sand, Shale, Gas			
Point Lookout	4390	4570	Sand, Gas			
Graneros Sand	6428	6514	Sand, Gas			
Dakota	6514	6715(TD)	Sand, Shale, Gas			

38. GEOLOGIC MARKERS