ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.	\mathbb{I}	
LAND OFFICE		
OPERATOR	\top	

OIL CONSERVATION DIVISION

DISTRIBUTION	 	P	. O. BOX 2088		Form C-103 Revised 10-1-7
SANTA FE	 	SANTA FI	E, NEW MEXICO	B7501	NEW 1323
FILE		•		, p	5a. Indicate Type of Lease
U.S.G.S.					State X Fee
LAND OFFICE					
OPERATOR					5. State Oil & Gas Lease No.
(00 NOT USE THIS FOR	SUNDRY NO	TICES AND REPORT TO DEEPEN	RTSONWELLES	Carl aldlager	
USE	APPLICATION FO	R PERMIT IN (PORM CITO		- " U (G /M)	7. Unit Agreement Name
OIL GAS WELL			JIINIO		
	<u>م</u> ـــ المــــ	THER-	00/1/	-4 1985 - 4	8. Farm or Lease Name ~
Name of Operator			Ollow	.	Aztoc Com A
Tenneco Oil Com	pany		OIL CO	N. DIV	Aztec Com 4
Address of Operator			DIST	, 2 V.	9. Well IVO.
P. O. Box 3249,	Englewoo	d, CO 80155	.01	. 3	<u> </u>
Location of well	<u> </u>			-	10. Field and Pool, or Wildcat
	165	^	Nost	1450	Aztec PC
BRIT LETTER	,	U FEET FROM THE	MEST TIME AND	1450 FEET PROM	
		_	0011	4 4 1 1	
THE South	NE, SECTION	TOWNSHIP	30N RANGE	:имрм	· ((((((((((((((((((((((((((((((((((((
					<u> </u>
mmmm	THITT	15. Elevation (Shor	w whether DF, RT, GR	, etc.)	12. County
					San Juan
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>			
•	Check Appr	opriate Box To Inc	licate Nature of I	Notice, Report or Ot	ther Data
NOTIC	E OF INTEN	ITION TO:	1	SUBSEQUEN	T REPORT OF:
		PLUS AND ABA	NDON REMEDIAL	- OF 1	ALTERING CASING
RFORM REMEDIAL WORK		LEGG WED VAV		=	PLUS AND ASANDONMENT
MPORARILY ABANDON		•	1	DRILLING OPHS.	ACRE WED YBYKDOWNER!
LL DR ALTER CASING		CHANGE PLANS	CASING TES	T AND CEMENT JOB	_
			OTHER_		
OTHER					••
 Describe Proposed or C work) SEE RULE 1103. 	ompleted Opera	tions (Clearly state all p	ertinent details, and gi	se pertinent dates, includin	g estimated date of starting any proposed
WORK SEE NOZE 1103.	•				
6/11/05 DTU/	tha CN 0	nmn out nlug	Dam +o DDTD	No fill land	+ha 022061
				No fill. Land	
NDBOP. NUWH.	Kick well	around w/N2.	RDMOSU. Final	l tbg detail: 72	2 jts 1-1/4", 2.4#,
J-55, EUE tbg.				-	
,		.,			
•					
			4. 4b. b	lades and halfer	
8. I hereby certify that the	information ab	ove is true and complete	to the pest of my knowl	euge and petter.	
Voto	n6// "			•	
hore //	17 Kinu	1	Sr. Regi	ulatory Analyst	DATE 6/13/85
SIGNED SOLVE	. / - 0.		TITLE OT . ROOM		
					FF181 A 4 A 4 A 4 A 4 A 4 A 4 A 4 A 4 A 4 A
N. 2. 1 A.					JUN 24 1985
Vriginal Signe	ed by FRANK	CHAVE?	TITLE SUPERVISO	DISTRICT 20 9	_ DATE
METRUTED BY				TOTALO TOTALO	