

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(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-077833
2. NAME OF OPERATOR Tenneco Oil Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 3249, Englewood, CO 80155	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 790' FSL, 1475' FEL	8. FARM OR LEASE NAME Florance
14. PERMIT NO.	9. WELL NO. 2A
	10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde
15. ELEVATIONS (Show whether SF, ST, GR, etc.) 5985' GR	11. SEC., T., R., N., OR S.W. AND SURVEY OR AREA Sec. 20, T30N, R9W
	12. COUNTY OR PARISH 13. STATE San Juan NM

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SEP 14 1984

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) <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.)

Tenneco requests permission to dual the above referenced well by recompleting in the Fruitland ~~coal~~ formation according to the attached detailed procedure.
Need NMOOD approval to dually complete
Coal interval

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SEP 20 1984
OIL CON. DIV. 1
DIST. 3

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

SIGNED *Scott M. Kruy* TITLE Sr. Regulatory Analyst DATE 8/20/84 **APPROVED**

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE SEP 18 1984
CONDITIONS OF APPROVAL, IF ANY: _____
for *Stephen J. Hener*
M. MILLENBACH
AREA MANAGER

NMOOD
*See Instructions on Reverse Side

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.


