

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

30-045-2127
5. LEASE DESIGNATION AND SERIAL NO.
SF - 078040 - SF 079691

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1. TYPE OF WORK
DRILL ☒ DEEPEN ☐ PLUG BACK ☐

2. TYPE OF WELL
OIL WELL ☐ GAS WELL ☒ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

3. NAME OF OPERATOR
Tenneco Oil Company

4. ADDRESS OF OPERATOR
P. O. Box 1714, Durango, Colorado

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
At surface 1710 FSL, 1155 FWL
At proposed prod. zone Unit L

6. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Gelbke Com.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLK.
AND SURVEY OR AREA

Sec 11, T-31-N, R-11-W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

14. DISTANCE FROM PROPOSED*
LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest grg. unit huc, if any)

16. NO. OF ACRES IN LEASE
320

17. NO. OF ACRES ASSIGNED
TO THIS WELL
320

18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH
7345

20. ROTARY OR CABLE TOOLS
Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
6093 Gr.

22. APPROX. DATE WORK WILL START*
October 9, 1967

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
15"	9-5/8"	32#	700	Cmt to surface.
8-3/4"	7"	20#	3200	250 sx.
6-1/4"	4-1/2"	10.5 & 11.6#	7345	150 sx first stage 100 sx second stage.

We plan to drill with rotary to an approximate depth of 7345. Run casing as shown above, log, perforate and frac and completed as gas well. Run deliverability tests.



IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout prevention program, if any.

24. SIGNED M. K. Wagner TITLE _____ DATE 9/21/67

(This space for Federal or State office use)

PERMIT NO. 9d APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS (5)
Cont (1)

*See Instructions On Reverse Side