| Voir 3160-5 November 1983) Formerly 9-331) DEPARTMENT OF THE INTERIOR vers BUREAU OF LAND MANAGEMENT | | | 05 50 | Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. SF-078040 | | |
|--|--------------------------------|-------------------------------------|---------------------------------------|---|-------------------|--|
| CUNDRY NO | OTICES AND REPO | RTS ON WELLS | - V | F INDIAN, ALLOTTEE | OR TRIBE NAME | |
| (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.) | | | | 7. UNIT AGREEMENT NAME | | |
| OLT CAS AST | <u> </u> | / | 8. 1 | PARM OR LEASE HAM | | |
| Tenneco Oil Company | | / | | Mudge LS | | |
| ADDRESS OF OPERATOR | | RECEIVED | 9. | While Mo. | | |
| P.O. Box 3249, Engle | ewood, Colorado 8 | 1155 | | 42 FIELD AND POOL, OR | EII DCAT | |
| See also space 17 below.) At surface | on clearly and in accordance w | NOV 1 0 1986 | | Blanco PC | | |
| 830' FSL, 1600' FEL | | BUREAU OF LAND MANAGEM | ENT | SURVEY OF AREA | | |
| 4. PERMIT NO. | 15. BLEVATIONS (Show w | FARMINGTON RESOURCE AR | | COUPTY OR PARISH | RIIW 18. STATE | |
| . PERMIT SU. | 5898' GL | | Si | an Juan | New Mexico | |
| | | icate Nature of Notice, Repo | | | | |
| NOTICE OF II | TENTION TO: | - | EUBERGURYT | | | |
| TEST WATER BEUT-OFF | PULL OR ALTER CABING | WATER SEUT-OFF | _ | ABPAIRING W | | |
| PRACTURE TREAT | MULTIPLE COMPLETE ABANDON® | FRACTURE TREATMS SHOOTING OR ACIDS | T | ABANDONMEN | [] | |
| REPAIR WELL | CHANGE PLANS | (Other) | | | | |
| (Other) | | (Note: Repo | rt results of m r Recompletion | ultiple completion of Beport and Log for | on Well m.) | |
| | | | | | | |
| | | | IN NO | | | |
| | | | | | | |
| | | | بن بنا نب | | | |
| 18. I hereby certify that the foregoi | ng is true and correct | | | | | |
| SIGNED Do | | LE Administrative Ana | lyst II | DATE 11/05 | 786 D | |
| (This space for Federal or State | r office use) | | · · · · · · · · · · · · · · · · · · · | - A | 7 | |
| APPROVED BY | TIT: | LE | | DATE OF 1 | -1010r- | |
| CONLITIONS OF APPROVAL, | IF ANY: | | | STOOD. | 1300 | |
| <u> </u> | | | Fin | AREA | W. | |
| aht | •Saa las | tructions on Reverse Side | , | · · · · · · · · · · · · · · · · · · · | MOUR | |

*See Instructions on Reverse Side