

CORRECTED 2/3/89

Form 3160-5
November 1983
Formerly 9-33C

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on reverse 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-078051	
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 6162 S. Willow Drive, Englewood, CO 80111		7. GUY AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also upon 17 below.) At surface 2055' FNL, 885' FEL		8. NAME OR LEASE NAME Neil LS	
14. PERMIT NO.		9. WELL NO. 87 R	
15. ELEVATIONS (Show whether SP, ST, OR, etc.) 6162' GL		10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde	
		11. SEC., T., R., N., OR S.E. AND SURVEY OR AREA Sec. 4, T31N, R11W	
		12. COUNTY OR PARISH San Juan	13. STATE NM

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"/>	FILL 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 PLANE <input type="checkbox"/>	(Other) <u>Drilling</u> <input checked="" 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.)

08/18/88 MIRU, drl mouse & rat hles. Spud 11 p.m. 8/17/88. Notified Ken Townsend, BLM, 2 p.m. 8/17/88 of spud.

08/19/88 Set & cmtd 6 jts 9 5/8" @ 260, cmtd w/200sx (236 ft.³) cmt. Cmt top at 300'.

08/20/88 Drl & svy.

08/21/88 Logging.

08/22/88 Ran DIL 3236-261, CDL-GR 3249-261. Set & cmtd 75 jts 7" in 2 stages, landed @ 3262, FC @ 3216 & DV 1 @ 2037. Cmtd 1st stage w/200sx (318 ft.³) & 2nd stgace w/324sx (579 ft.³). Cmt in place 9:25 p.m. 8/21/88 - good circ - no cmt to sfs. RU to run temp svy.

08/23/88 Ran temp svy - top cmt 390'. Ojo: 1850'. TIH & do DV @ 2037.

08/24/88 Drl & svy.

08/25/88 Prep to log.

08/26/88 Ran DIL, 5514-3254 & DDL-GR 5512-3254 & RD. Ream 40' to btm, POOH, LDDP & DC. RU & ran 58 jts 4 1/2" csg, landed @ 5509, cmtd w/335sx (500 ft.³). Top liner @ 3087, FC @ 5464. Bump plug, cmt in place 5 p.m. 8/25/88. Rev out - no cmt. LDDP, NDBOPE & secure well. Notified Ken Townsend, BLM, of cmt job @ 12:45 p.m. Rel rig @ 9:30 p.m.

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

SIGNED Steve Foster TITLE Sr. Administrative Analyst DATE 2/3/89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

ACCEPTED FOR RECORD
FEB 15 1989
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side
NMOCC