

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. SF-078147
2. NAME OF OPERATOR Tenneco Oil Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 3249, Englewood, Colorado 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 990' FNL, 1750' FEL	8. FARM OR LEASE NAME Moore LS
	9. WELL NO. 1
	10. FIELD AND POOL, OR WILDCAT Blanco MV
	11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 27, T32N, R2W
14. PERMIT NO. 30-045-13342	12. COUNTY OR PARISH San Juan
15. ELEVATIONS (Show whether depth or surface) 6180' GL	13. STATE County

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	PULL OR ALTER CASING
FRACTURE TREAT	MULTIPLE COMPLETION
SHOOT OR ACIDIZE	ABANDON*
REPAIR WELL	CHANGE PLANS
(Other)	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREATMENT	ALTERING CASING
SHOOTING OR ACIDIZING	ABANDONMENT*
(Other) Cancellation of prior request	X

(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.)\*

Due to economic conditions that exist in the industry, the Sundry Notice filed on 01/10/86 requesting a sidetrack to be done on this well has been cancelled.

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

SIGNED Mike McRedie

TITLE Administrative Analyst DATE 5/15/87

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

MAY 15 1987

FARMINGTON RESOURCE AREA

BY SMW

\*See Instructions on Reverse Side

NMOC