

Stogner, Michael

From: Stogner, Michael
Sent: Wednesday, May 11, 2005 8:35 AM
To: George A. Cox (E-mail)
Subject: Dawson "A" Well No. 1-G

RE: Your application dated April 15, 2005 to include the Chacra interval as an unorthodox gas well location for XTO Energy, Inc.'s Dawson "A" Well No. 1-G (API No. 30-045-20050), located 1500' FSL & 475' FWL (L) of Sec. 4-T27N-R8W, San Juan County, NM (Division administrative application reference No. pSEM0-510835426).

Mr. Cox:

In reviewing your application, I find that within the SW/4 of Section 4 XTO also operates the Dawson "A" Well No. 1 (API No. 30-045-20050), which is currently completed in both the Basin-Dakota and Blanco-Mesaverde Pools. The location of the Dawson Well No. 1, being 790' FSL & 1450' FWL (Unit N) of Section 4, is a standard Chacra gas well location within the SW/4 of Section 4. Why can't this well be utilized for XTO's planned recompletion?

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1A. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

B. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☒

OTHER

SINGLE
ZONE ☐MULTIPLE
ZONE ☒

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 1714, Durango, Colorado

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

790 FSL 1450 FWL

At proposed prod. zone

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

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drig. unit line, 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

7505

20. ROTARY OR CABLE TOOLS

Rotary

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

6723 Gr.

22. APPROX. DATE WORK WILL START*

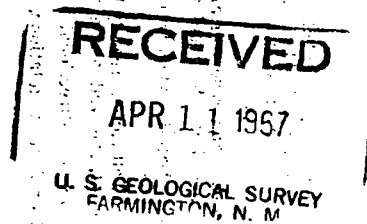
April 13, 1967

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
15"	10-3/4	32#	700	Cmt to surface
9-7/8"	7-5/8	26.4#	3150	260 sx
6-3/4	4-1/2	10.5 & 11.6#	7505	100 sx 1st stage 150 sx 2nd stage

We plan to drill to T.D. 7505'. Run IES & GRD Logs. Run casing as shown.
Perf and Frac both Mesaverde and Dakota zone. Run tbq, conduct deliverability
tests and complete as a dual well.



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 preventer program, if any.

24.

SIGNED

G. A. Ford

(This space for Federal or State office use)

TITLE

Senior Production Clerk

DATE

April 10, 1967

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

5 USGS

1 File

*See Instructions On Reverse Side

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACERAGE DEDICATION PLAT**

All distances must be from the outer boundaries of the Section

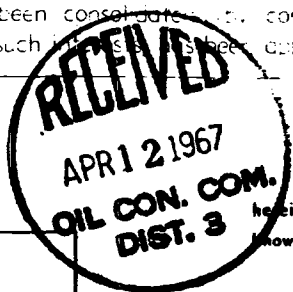
Operator Tenneco Oil Company		Lease Dawson "A"		Well No. 1	
Unit Letter N	Section 4	Township 27 North	Range 8 West	County San Juan	
Actual Footage Location of Well					
790	feet from the	South	line	1450	feet from the
Ground Level Elev.	Producing Formation		PK.	West	line
5723' ungraded	Basin Dak. & Blanco Mv	Basin Dak. & Blanco Mv.	Dedicated Acreage 321.33 321		W/2 Acres

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof, both as to working interest and royalty.
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, forced pooling, etc?

Yes ☐ No ☐ If answer is yes, type of consolidation _____

If answer is no, list the owners and tract descriptions which have actually consolidated. Use reverse side of this form if necessary.

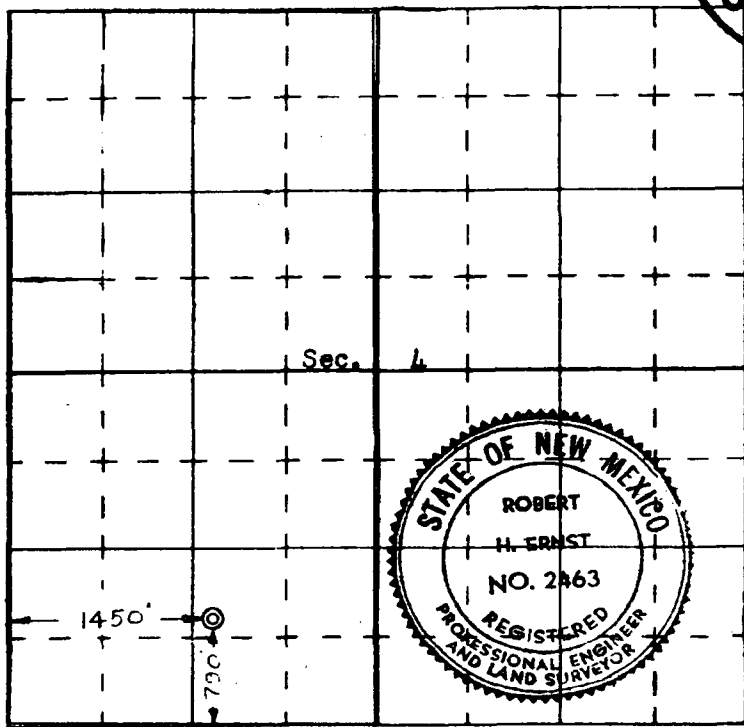
No allowable will be assigned to the well until all interests have been consolidated by communitization, unitization, forced pooling, or otherwise, or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

G. A. Ford
Name **G. A. Ford**
Position **Senior Production Clerk**
Tenneco Oil Company
Company
Date **April 10, 1967**



N

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

7 April 1967
Date
Robert H. Ernst
Registered Professional Engineer
and/or Land Surveyor
Robert H. Ernst
N. Mex. PE & LS 2463

Ernst Engineering Co.
Durango, Colorado

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved,
Budget Bureau No. 42 R1421.

5. LEASE DESIGNATION AND SERIAL NO.

NM 05791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Tenneco Oil Company		8. FARM OR LEASE NAME Dawson "A"	
3. ADDRESS OF OPERATOR P. O. Box 1714, Durango, Colorado 81301		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790 FSL, 1450 FWL		10. FIELD AND POOL, OR WILDCAT Dual Basin Dak & Blanco Mv	
14. PERMIT NO.		11. SEC. T., R., M., OR BLM. AND SURVEY OR AREA Sec. 4, T-27-N, R-8-W	
15. ELEVATIONS (Show whether DF, NT, OK, etc.) 6723 Gr.		12. COUNTY OR PARISH San Juan	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<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.)*

Spud 4/15/67. Drld to 546'. Ran 15 jts 10-3/4" 32.75# csg set at 511. Cmdt 2/400 sx. Cmt circ. WOC. Drld to 3150. Ran 98 jts 7-5/8" 24# csg set at 3143. Cmdt w/275 sx. Drld to T.D. 7455 on 4/23/67. Ran Induction Formation Density, Neutron Porosity Correlation logs. Ran 234 jts 4-1/2" 11.6 & 10.5# csg set at 7464 w/stage collar at 5508. Cmdt first stage w/145 sx, 2nd stage w/225 sx. Rel rig 4/25/67. WO Comp.

RECEIVED

APR 27 1967

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

APR 28 1967
OIL CON. COM.
DIST. 3

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

SIGNED

G. A. Ford

TITLE Senior Production Clerk

DATE April 26, 1967

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

5 USGS
1 Sinclair
1 File

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

6. LEASE DESIGNATION AND SERIAL NO.

NM 05791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dawson "A"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT Dual
Basin Dak & Blanco MV11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 4, T-27-N, R-8-W

12. COUNTY OR PARISH

San Juan

13. STATE

NEW Mexico

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 1714, Durango, Colorado

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

790 FSL, 1450 FWL Unit N

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, WT, GR, etc.)

6723 Gr.

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☒SHOOTING OR ACIDIZING ☒(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(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.)*

4/27/67. Rig up completion rig. Perf Dak as follows: 7294-96 w/2 SPF, 7304-06 w/2 SPF, 7345 w/2 SPF, 7411 w/2 shots, 7416-18 w/2 SPF, 7433 w/2 shots. Frac as follows: 5,000 gals at 1/2#/gal 20-40 sd, 15,000 gals at 3/4#/gal sd, and 40,000 gals w/3/4#/gal 20-40 sd plus 2#/gal 12-20 glass beads. Avg inj rate 47 BPM, 4,000 psi. Perf MV as follows: 5365-2 holes, 5337 - 2 holes, 5274 - 2 holes, 5246-52 1/ft., 5225 - 2 holes, 5172-76 w/1/ft. 5155 2 holes, 5238-40 w/2 /ft. Frac dn csg w/30,000# 20-40 and 40,000# 10-20 sd w/4#/1000 gals FR-2. Max rate 60 BPM @ 3800 psi. Blew well to pit. Ran production pkr and set at 7250. Ran 247 jts 2-3/8" tubing set at 7248'. Blew both zones to pit, rel rig 5/1/67. WO test.



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

SIGNED

G. A. Ford

TITLE

Senior Production Clerk

DATE

May 2, 1967

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:5 USGS
1 Sinclair
1 File

TITLE

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
WASHINGTON, D. C.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____		5. LEASE DESIGNATION AND SERIAL NO. MM 03791	
b. TYPE OF COMPLETION: NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR Tenneco Oil Company		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR P. O. Box 1714, Durango, Colorado		8. FARM OR LEASE NAME Dawson "A"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements). At surface 790 FSL, 1450 FWL, Unit J At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT San Juan Dakota & Blanco NW	
15. DATE SPUDDED 4/15/67		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 4, T-27-N, R-8-W	
16. DATE T.D. REACHED 4/24/67		12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 6/2/67		13. STATE New Mexico	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6740 KB		19. ELEV. CASINGHEAD _____	
20. TOTAL DEPTH, MD & TVD 7455		21. PLUG, BACK T.D., MD & TVD 7450	
22. IF MULTIPLE COMPL., HOW MANY* - 2 -		23. INTERVALS DRILLED BY 0-7455	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7433-7294 Dakota 5365-5238 Mesaverde		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN IRS, CND, SNP		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
10-3/4	32.75	511	15"
7-5/8	24.6	3142	9-7/8
4-1/2	11.6 & 10.5	7464	6-3/4
CEMENTING RECORD			
400 sx			
375 sx			
370 sx			
AMOUNT PULLED None			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8	7248	7250	
31. PERFORATION RECORD (Interval, size and number)			
7294-96 2 SPF 7394-w/2 5274 w/2			
7304-06 2 SPF 7411 w/2 5346-52 w/1			
7345 2 shots 7416-16 w/2 5225 - 2			
7357 2 shots 7433 w/2 5172-76 1/ft.			
7373 2 shots 5365 w/2 5155 - 2			
7383 2 shots 5337 2 5155-40 2/ft.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
7330-7270		5,000 gals + 1/2 gal 20-40 ss &	
		15,000 gals, 3/4 gal ss, 40,000	
		gals w/3/4 gal 20-40 + 2 1/2 gal 12-2	
		glass beads.	
33. PRODUCTION			
DATE FIRST PRODUCTION SI		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) SI			
DATE OF TEST SI 6/1/67	HOURS TESTED 3	CHOKE SIZE 3/4	PROD'N. FOR TEST PERIOD →
FLOWING PRESS. 1567 PSIA	CASING PRESSURE 929 PSIA	CALCULATED 24-HOUR RATE →	OIL—BBL. 5764 BK
			GAS—MCF. 5337 MV
			WATER—BBL. →
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
TEST WITNESSED BY JUN 7 1967			
35. LIST OF ATTACHMENTS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED Mr. H. J. Gayer		TITLE _____	
DATE June 6, 1967			

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on Items 22 and 24, and 83, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see Item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in Item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH
Chacra	3880	3890	Sand (Not Tested)	Mesa Verde	4675	
Mesa Verde	4675	5370	Sand & Shale (Gas)	Hancock	5530	
Dakota	7260	7460	Sand & Shale (Gas - Dry)	Callup	6342	
				Greenhorn	7110	
				Dakota	7205	

ADMINISTRATIVE ORDER
OF THE OIL CONSERVATION COMMISSION

Under the provisions of Rule 112-A, Tenneco Oil Company made application to the New Mexico Oil Conservation Commission on May 4, 1967, for permission to dually complete its Dawson "A" Well No. 1 located in Unit N of Section 4, Township 27 North, Range 8 West, NMPH, San Juan County, New Mexico in such a manner as to produce gas from the Blanco-Mesaverde Pool and the Basin-Dakota Pool.

Now, on this 24th day of May, 1967, the Secretary-Director finds:

- (1) That application has been duly filed under the provisions of Rule 112-A of the Commission's Rules and Regulations;
- (2) That satisfactory information has been provided that all operators of offset acreage have been duly notified; and
- (3) That no objections have been received within the waiting period as prescribed by said rule.
- (4) That the proposed dual completion will not cause waste nor impair correlative rights.
- (5) That the mechanics of the proposed dual completion are feasible and consonant with good conservation practices.

IT IS THEREFORE ORDERED:

That the applicant herein, Tenneco Oil Company, be and the same is hereby authorized to dually complete its Dawson "A" Well No. 1 located in Unit N of Section 4, Township 27 North, Range 8 West, NMPH, San Juan County, New Mexico, in such a manner as to produce gas from the Blanco-Mesaverde Pool and the Basin-Dakota Pool through the casing-tubing annulus and the tubing respectively.

PROVIDED HOWEVER, That applicant shall complete, operate, and produce said well in accordance with the provisions of Rule 112-A.

PROVIDED FURTHER, That applicant shall take packer-leakage tests upon completion and annually thereafter during the Annual Deliverability Test Period for the Basin-Dakota Pool.

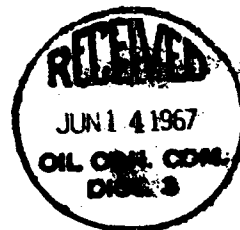
IT IS FURTHER ORDERED: That jurisdiction of this cause is hereby retained for the entry of such further orders as the Commission may deem necessary.

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

STATE OF NEW MEXICO
OIL CONSERVATION COMMISSION

A. L. PORTER, Jr.
Secretary-Director

SEAL



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42 R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM 05791

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		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Tenneco Oil Company		8. FARM OR LEASE NAME Dawson "A"	
3. ADDRESS OF OPERATOR P. O. Box 1714, Durango, Colorado		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790 FSL, 1450 FWL, Unit J		10. FIELD AND POOL, OR WIRE-CAT Dual Blanco Mv & Basin Dakota	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 4, T-27-N, R-8-W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6740 KB		12. COUNTY OR PARISH San Juan	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other)

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other)

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

Retested Dakota zone

(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.)*

Repaired pkr leak and re-tested Dakota zone. Tstd 6/7/67.
SIP 2001, FP 176, AOF 2348 MCF/D.



RECEIVED

JUN 12 1967

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

SIGNED M. K. Wagner

TITLE

DATE June 8, 1967

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

OK

*See Instructions on Reverse Side

TABULATION OF DEVIATION TESTS

TENNECO OIL COMPANY

DAWSON "A" NO. 1

<u>DEPTH</u>	<u>INCLINATION</u>
120'	1/2°
270'	1/4°
540'	1/4°
1540'	1/4°
2040'	1°
2570'	1°
2725'	1-1/4°
3131'	1°
3550'	1/2°
3900'	0°
4180'	1/2°
4500'	3/4°
4737'	1°
5050'	1-1/4°
5206'	1-1/4°
5420'	1°
5725'	1-1/4°
6142'	2°
6361'	2-1/2°
6665'	4-3/4°
6955'	3-1/2°
7297'	5°



A F F I D A V I T

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation test taken on TENNECO OIL COMPANY'S DAWSON "A" NO. 1, Blanco Mesaverde and Basin Dakota Field, located in Section 4, T-27-N, R-8-W, San Juan County, New Mexico.

Signed

George A. Ford
Senior Production Clerk

THE STATE OF COLORADO)

COUNTY OF LA PLATA)

BEFORE ME, the undersigned authority, on this day personally appeared George A. Ford known to me to be Senior Production Clerk for Tenneco Oil Company and to be the person whose name is subscribed to the above statement, who, being by me duly sworn on oath, states that he has knowledge of the facts stated herein and that said statement is true and correct.

SUBSCRIBED AND SWORN TO before me, a Notary Public in and for said County and State this 26th day of April, 1967.

My commission expires June 28, 1969.

Distribution:

- 1 Copy - New Mexico Oil Conservation Commission
- 1 Copy - Sinclair Oil and Gas
- 1 Copy - File

M. R. L. Poer
MARIE L. POER
P.O. Box 1714
Durango, Colorado
La Plata County, Colorado

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	GAS
OPERATOR	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-104 and C-110
 Effective 1-1-65

I. **PRORATION OFFICE**

Operator
 Tenneco Oil Company

Address
 P. O. Box 174, Durango, Colorado

Reason(s) for filing (Check proper box)
 New Well ☒ Change in Transporter of:
 Recompletion ☐ Oil ☐ Dry Gas ☐
 Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)
 Effective first delivery

If change of ownership give name
 and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dawson "A"	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Fed	Lease No. NM 05791
Location Unit Letter N : 790 Feet From The South Line and 1450 Feet From The West				
Line of Section 4 Township 27N Range 8W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Rock Island Oil and Refining	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1528, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico
If well produces oil or liquids, give location of tanks.	Unit N Sec. 4 Twp. 27 Rge. 8 Is gas actually connected? No When On Approval

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 4/15/67	Date Compl. Ready to Prod. 6/2/67		Total Depth 7455		P.B.T.D. 7450			
Elevations (DF, RKB, RT, GR, etc.) 6740 KB	Name of Producing Formation Basin Dakota		Top Oil/Gas Pay 7294		Tubing Depth 7250			
Perforations 7294-7433 Dakota				Depth Casing Shoe 7464				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15	10-3/4		511		400 SX			
9-7/8	7-5/8		3143		375 SX			
6-3/4	4-1/2		7464		370 SX			
	2-3/8		7250					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 2348	Length of Test 3 hrs	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pr.	Tubing Pressure (Shut-In) 2001	Casing Pressure (Shut-In) Pkr	Choke Size 3/4

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

M. K. Wagner
 M. K. Wagner (Signature)

August 3, 1967

(Title)

(Date)

OIL CONSERVATION COMMISSION

AUG 4 1967

APPROVED _____, 19____

Original Signed by Emery C. Arnold

SUPERVISOR DIST. #3

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED	5
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TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRORATION OFFICE	1

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Tenneco Oil Company

Address
P. O. Box 1714, Durango, Colorado 81301

Reason(s) for filing (Check proper box)
 New Well ☒ Change in Transporter of:
 Recompletion ☐ Oil ☐ Dry Gas ☐
 Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)
Effective first delivery

If change of ownership give name and address of previous owner Dual Basin Dakota and Blanco Mesaverde well.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dawson "A"	Well No. 1	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Fed	Lease No. nm 05791
Location Unit Letter N 790 Feet From The South Line and 1450 Feet From The West Line of Section 4 Township 27N Range 8W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Rock Island Oil and Refining	P. O. Box 1528, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit Sec. Twp. Rge. N 4 27 8	No On Apprvl

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
		X	X					
Date Spudded 4/15/67	Date Compl. Ready to Prod. 6/1/67	Total Depth 7455	P.B.T.D. 7450					
Elevations (DF, RKB, RT, GR, etc.) 6740	Name of Producing Formation Blanco Mesaverde	Top Oil/Gas Pay 5238	Tubing Depth 7250					
Perforations 5365-5238 Mesaverde			Depth Casing Shoe 7464					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
15	10-3/4	511	400					
9-7/8	7-5/8	3143	375					
6-3/4	4-1/2	7464	370					
	2-3/8	7250						

VI. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 5337	Length of Test 3 hrs	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pr.	Tubing Pressure (Shut-in) 348 (FR)	Casing Pressure (Shut-in) 929	Choke Size 3/4

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

M. K. Wagner
M. K. Wagner (Signature)
(Title)
August 3, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 4 1967, 19
BY Original Signed by Emery C Arnold
TITLE SUPERVISOR DIST. #3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED		4
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	GAS	
OPERATOR		1
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-101 and C-110
 Effective 1-1-65

I. OPERATOR

Operator Tenneco Oil Company

Address Suite 1200 Lincoln Tower Bldg. - Denver, Colorado 80203

Reason(s) for filing (Check proper box)

New Well <input type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Change of authorized transporter of
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	condensate only.
		Effective 3/13/70

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Dawson A</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Blanca Mesaverde</u>	Kind of Lease State, Federal or Free	Lease No.
Location				
Unit Letter <u>N</u> : <u>790</u> Feet From The <u>S</u> Line and <u>1450</u> Feet From The <u>W</u>				
Line of Section <u>4</u> Township <u>27N</u> Range <u>8W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Plateau, Inc.</u>	<u>P. O. Box 108 - Farmington, New Mexico</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

G. A. Ford
 (Signature) G. A. Ford
 Sr. Production Clerk
 (Title)

OIL CONSERVATION COMMISSION

APPROVED MAR 20 1970

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for allowable on new and recompleted wells.

NO. OF COPIES RECEIVED	4
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LAND OFFICE	
TRANSPORTER	OIL 1
	GAS 1
OPERATOR	1
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-101 and C-110
 Effective 1-1-65

Operator Tenneco Oil Company	
Address Suite 1200 Lincoln Tower Bldg. - Denver, Colorado 80203	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change of authorized transporter of condensate only.
Recompletion <input type="checkbox"/>	Effective 3/13/70
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

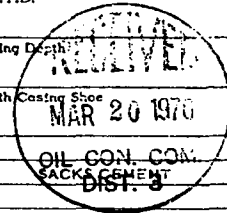
Lease Name Dawson A	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter N : 790 Feet From The S Line and 1450 Feet From The W Line of Section 4 Township 27N Range 8W , NMPM, 5th Subn County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.	P. O. Box 108 - Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	
Unit	Sec. Twp. Rge.
Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pcy	Tubing Depth					
Perforations			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET						
								

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

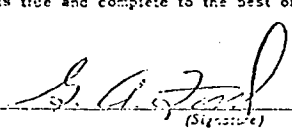
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


 (Signature) **G. A. Ford**
 Sr. Production Clerk
 (Title)

OIL CONSERVATION COMMISSION
MAR 20 1970
 APPROVED _____
 BY **Original Signed by Emery C. Arnold**
 TITLE **SUPERVISOR DIST. #3**

This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviator tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for allowable on new and recompleted wells.

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	GAS
OPERATOR	
PRODUCTION OFFICE	

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

I. OPERATOR

Operator: Tenneco Oil Company

Address: P. O. Box 3249, Englewood, CO 80155

Reason(s) for filing (Check proper box):

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Other (Please explain):

Recompletion ☐ Oil ☐ Dry Gas ☐ Other (Please explain):

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☒

If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Dawson A</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Blanco Mesaverde</u>	Kind of Lease State, Federal or Fee	Lease No. <u>29-005791</u>
Location Unit Letter <u>N</u> ; <u>790</u> Feet From The <u>South</u> Line and <u>1450</u> Feet From The <u>West</u>				
Line of Section <u>4</u> Township <u>27N</u> Range <u>8W</u> NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Gary Energy Corporation</u>	<u>4 Inverness Ct. East, Englewood, CO 80112-5591</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Co.</u>	<u>P. O. Box 4990, Farmington, NM 87401</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When?
Unit <u>N</u> Sec. <u>4</u> Twp. <u>27N</u> Rge. <u>8W</u>	<u>Yes</u>

If this production is commingling with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res't. <input type="checkbox"/> Diff. Res't. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation
Perforations	Top Oil/Gas Pay
Tubing Depth	
Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
DEPTH SET	
SACKS CEMENT	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Production Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-In)	Casing Pressure (Shot-In)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature)
Administrative Supervisor
(Title)
5/2/85
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 18 1985
BY Frank J. [Signature]
TITLE SUPERVISOR DISTRICT # 9

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 1111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-85

I. OPERATOR

Operator: Tenneco Oil Company

Address: P. O. Box 3249, Englewood, CO 80155

Reason(s) for filing (Check proper box):

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Other (Please explain):

Recompletion ☐ Oil ☐ Dry Gas ☐ Other (Please explain):

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☒

If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Dawson A</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Basin Dakota</u>	Kind of Lease State, Federal or Fee	Lease No. <u>29-005791</u>
Location: Unit Letter <u>N</u> ; <u>790</u> Feet From The <u>South</u> Line and <u>1450</u> Feet From The <u>West</u>				
Line of Section <u>4</u> Township <u>27N</u> Range <u>8W</u> . NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Gary Energy Corporation</u>	<u>4 Inverness Ct. East, Englewood, CO 80112-5591</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Co.</u>	<u>P. O. Box 4990, Farmington, NM 87401</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When:
Unit <u>N</u> , Sec. <u>4</u> , Twp. <u>27N</u> , Rge. <u>8W</u>	Yes

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be of recovery of total volume of load oil and must be equal to or exceed top allowable for this depth for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Testing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Administrative Supervisor
(Signature)
(Title)

5/2/85

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 08 1985
BY Frank J. [Signature]
TITLE SUPERVISOR DISTRICT # 9

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-05791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dawson A

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde

11. SEC., T., R., OR B.L. AND
SURVEY OF AREA

Sec. 4, T27N, R8W

12. COUNTY OR PARISH 13. STATE

San Juan NM

1. OIL ☐ GAS ☒ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations. See also space 17 below.)
At surface

790' FSL, 1450' FWL

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6740' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

ALTERING CASING

ABANDONMENT*

(Other)

(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.)

8/19/85 MIRU workover. Kill well. NDWH. NUBOP. RIH w/Baker latchin pkr plug on tbq. Latch plug into Model D pkr @ 7250'. RIH w/WL set tbq RBP @ 5075' KB. Press tst csg. Will not hold press. Inj 4 BPM @ 100 psi. GIH w/Bakker Bullbore packer. With 8 jts in hole, drop pkr & tbq in hole. RIH w/155 jts tbq opened. Screw into fish.

8/20/85 RIH w/tbg & pkr to 2524'. Set pkr @ 2524'. Press tst BS. Will not hold press. Press tst tbq. Hold 2500 psi for 10 mins. POOH to 59'. Set pkr. Press tst BS. Will not hold. POOH to 29'. Set pkr. Press tst BS. Will not hold. Leak appears to be in WH. ND tbq head. 4-1/2" csg is cut too short to be in contact with secondary seals. Weld on 4-1/2" csg extension. Replace 4-1/2" primary, secondary seals & test to @ 3000 psi. Held o.k.

8/21/85 MIRU Blue jet. RIH & perf 4 sqz holes @ 4770' KB. Attempt to estab circulation up 4-1/2" by 7" annulus w/no success. Attempt to estab inj rate. Obtain 1/2 BPM @ 3000 psi w/inj rate falling, eventually losing inj entirely. Decided to forego sqz. MIRU acid truck. Release pkr & RIH to 4960'. Spot 125 gals of 7-1/2% DI HCl. POOH w/tbg & pkr. MIRU Bluejet. Run correlation strip from 5050' to 4700'. RIH w/perf'g gun & perf MV Menefee fr 4814-19', 4859-70', 4964-66' as per FDC Gamma Ray dated 4-24-67 w/2 JSPF w/3-1/8" csg gun.

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

SIGNED

Scott McKinn

TITLE Senior Regulatory Analyst

DATE

8/26/85

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

RECEIVED

ACCEPTED FOR RECORD

DATE

SEP 03 1985

AUG 30 1985

*See Instructions on Reverse Side
ON CON. DIV. FARMINGTON RESOURCE AREA
DIST. 3 BY *Jim*

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-05791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dawson A

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde

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

Sec. 4, T27N, R8W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

790' FSL, 1450' FWL

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, ST, GR, etc.)

6740' GR

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well
Completion or Re-completion 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.)*

8/22/85 RIH w/pkr. Set pkr @ 4784'. Put 500 psi on BS. Etab inj into form @ 4.5 BPM & 2000 psi. Acidize form w/900 gals of 15% weighted HCl & 54 - 1.1 S.G. ball slrs. Acidized @ 5 BPM & 2000 psi. Good ball action. Complete balloff. Swab well. Make 7 runs & swab to SN. No drilling mud evident. Release pkr & RIH & knock balls off perfs. POOH w/tbg. Frac dn csg w/slick water & 20-40 sd as follows:

VOL (GAL)	SAND CON. (#/GAL)	RATE/BPM	PRESS/PSI
13,900	0	25.5	2,000
6,600	1/2	25.2	1,950
6,600	1.0	25.0	1,825
6,600	1.5	26	1,810
12,600	2	29	1,900
	Dropped to:	17	1,800

Screened out 2/40,538# in formation.

AIR = 25 BPM AIP = 1900 psi

ISIP = 1350; 5 MIN = 800; 15 min - 750 psi.

RECEIVED

SEP 03 1985

OIL CON. DIV.
DIST. 3

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

SIGNED

Scott McKinn

TITLE Senior Regulatory Analyst

DATE

8/26/85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

AUG 30 1985

FARMINGTON RESOURCE AREA

BY

Sm

*See Instructions on Reverse Side

NMOCC

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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM-05791

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Tenneco Oil Company

3. ADDRESS OF OPERATOR
P. O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

790' FSL, 1450' FWL

RECEIVED

AUG 29 1985

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Dawson A

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Blanco Mesaverde

11. SEC., T., R., N., OR S.E. AND
SURVEY OR AREA
Sec. 4, T27N, R8W

14. PERMIT NO.

15. ELEVATIONS (Show whether SP, HY, OR, etc.)
6740' GR

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:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☒
(Other) ☐

REPAIRING WELL ☒
ALTERING CASING ☐
ABANDONMENT* ☐

(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.)*

8/23/85 RIH w/tbg, F nipple one joint off bottom and retrieving head. CO with foam to top of RBP. Pick up tubing and land 167 joints 2-3/8" tbg at 4901'. NDOBOP. NUWH. Kick well around with nitrogen. RDMOSU.

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

SIGNED

Scott M. Kiny

TITLE Senior Regulatory Analyst

DATE 8/26/85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE AUG 30 1985

FARMINGTON RESOURCE AREA

BY *SMM*

*See Instructions on Reverse Side

NMOCC

Title 18 U.S.C. Section 1001, makes it a crime for any person to 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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(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. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 3249, Englewood, CO 80155

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

790' FSL, 1450' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6740' GR

5. LEASE DESIGNATION AND SERIAL NO.

NM-05791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dawson A

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde

11. SEC., T., R., M., OR B.L. AND
SURVEY OR AREA

Sec. 4, T27N R8W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Remove bridge plug

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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 perti-
nent to this work.)*

10/5/85 MIRUSU. Killed well w/1% KCL wtr. NDMH. NUBOP. RIH 6' and tag sand @
4907'. CO to RBP w/foam. Attempted to latch onto RBP but could not.

10/7/85 Killed well w/1% KCl wtr. RIH w/2-3/8" tbg & retrieving head for Model F pkr
plug. CO to pkr plug w/N2 foam. Latched plug & POOH w/tbg & plug. RIH w/2-3/8" tbg, S/A
prod tube, S/N & Model T sliding sleeve. Landed tbg in Model F pkr @ 7250' w/10,000#'s
compression & w/sliding sleeve @ 5172'. NDBOP. NUWH. RDMOSU.

RECEIVED
OCT 17 1985
OIL CON. DIV.
DIST. 3

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

SIGNED

TITLE Senior Regulatory Analyst

DATE

10/10/85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

DATE

OCT 16 1985

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY

from

Form 3160-5
November 1983
Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(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 different depths.
Use "APPLICATION FOR PERMIT" for each proposal.)

RECEIVED

JAN 10 1986

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	6. LEASE DESIGNATION AND SERIAL NO. NM-05791
2. NAME OF OPERATOR Tenneco Oil Company	7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P. O. Box 3249, Englewood, CO 80155	8. NAME OF LEASE NAME Dawson A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	9. WELL NO. 1
10. FIELD AND POOL, OR WILDCAT Blanco MV/Basin DK	11. SEC., T., R., M., OR BLK. AND SUBST OF AREA Sec. 4, T27N R8W
12. PERMIT NO.	13. COUNTY OR PARISH San Juan
15. ELEVATIONS (Show whether SP, ST, OR, etc.) 6740' GR	14. STATE NM

790' FSL, 1450' FWL

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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRAC TURE TREAT	<input type="checkbox"/>	FRAC TURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	Commingle Production	(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 commingle the mesaverde and dakota formation according to the attached detailed procedure. The New Mexico Oil Conservation Division has granted approval with order #R-8096. Production to be split 48% mesaverde, 52% dakota. per order.

RECEIVED
JAN 15 1986
OIL CON. DIV.
DIST. 3

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

SIGNED

(This space for Federal or State office use)

TITLE Senior Regulatory Analyst

DATE 1/7/86

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

JAN 13 1986

M. MILLENBACH
AREA MANAGER

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person who 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.

0351/3

LEASE Dawson

WELL NO. A#1

CASING:

10 3/4 "OD, 32.75LB, H-40CSG.W/ 400 SX

TOC @ Surf . HOLE SIZE 15" DATE _____

REMARKS _____

7 5/8 "OD, 24 LB, H-40 CSG.W/ 375 SX

TOC @ _____ . HOLE SIZE 9 7/8" DATE _____

REMARKS _____

10.5

4 1/2 "OD, & 11.6LB, J-55 CSG.W/ 144/225 SX

TOC @ 4800' . HOLE SIZE 6 1/4" DATE _____

REMARKS stage tool @ 5508

TUBING:

2 3/8 "OD, 4.7 LB, J-55GRADE, RD, CPLG

LANDED @ 7248 . , PACKER, 7250'

DETAILED PROCEDURE:

1. MIRU a mast truck and WL Unit.
2. Lubricate in hole with 1-3/8" hollow carrier thru-tubing perforating gun with a gun GR/CCL and correlate shooting depths to attached log sections.

Shoot 5 holes as follows:

5254' - 1 JS

5252' - 1 JS

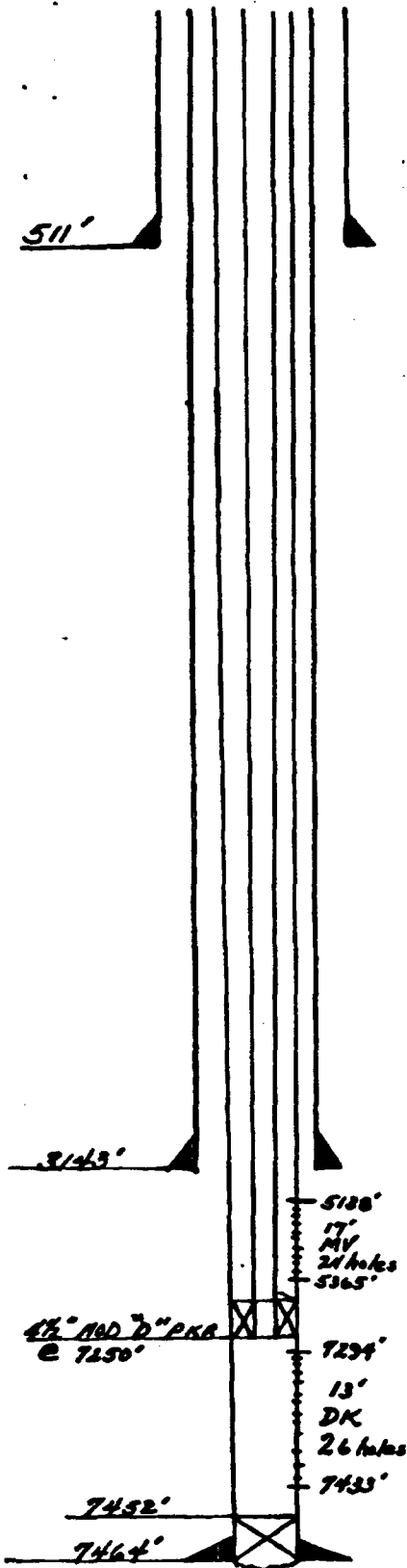
5250' - 1 JS

5248' - 1 JS

5246' - 1 JS

Total 5' - 5 holes

3. POOH w/ gun and shut well in pending notification of pipeline CO's and EPS.
4. File new C-104
5. Return well to production via 2-3/8" tbg string.



copy
STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION

IN THE MATTER OF THE HEARING
CALLED BY THE OIL CONSERVATION
DIVISION FOR THE PURPOSE OF
CONSIDERING:

RECEIVED
DEC 20 1985
OIL CON. DIV.
DIST. 3

CASE NO. 8764
Order No. R-8096

APPLICATION OF TENNECO OIL COMPANY
FOR DOWNHOLE COMMINGLING,
SAN JUAN COUNTY, NEW MEXICO

ORDER OF THE DIVISION

BY THE DIVISION:

This cause came on for hearing at 8 a.m. on November 21, 1985, at Santa Fe, New Mexico, before Examiner Michael E. Stogner.

NOW, on this 18th day of December, 1985, the Division Director, having considered the testimony, the record, and the recommendations of the Examiner, and being fully advised in the premises,

FINDS THAT:

(1) Due public notice having been given as required by law, the Division has jurisdiction of this cause and the subject matter thereof.

(2) At the time of the hearing Cases Nos. 8762, 8763, 8764, and 8765 were consolidated for the purpose of testimony.

(3) The applicant, Tenneco Oil Company, is the owner and operator of the Dawson "A" Well No. 1, located 790 feet from the South line and 1450 feet from the West line (Unit N) of Section 4, Township 27 North, Range 8 West, NMPM, San Juan County, New Mexico.

(4) The applicant seeks authority to commingle production from the Basin-Dakota and Blanco-Mesaverde Gas Pools within the wellbore of the above-described well.

(5) From the Basin-Dakota zone, the subject well is capable of low marginal production only.

(6) From the Blanco-Mesaverde zone, the subject well is capable of low marginal production only.

(7) The proposed commingling should result in the recovery of additional hydrocarbons from each of the subject pools, thereby preventing waste, and will not violate correlative rights.

(8) The reservoir characteristics of each of the subject zones are such that underground waste would not be caused by the proposed commingling provided that the well is not shut-in for an extended period.

(9) To afford the Division the opportunity to assess the potential for waste and to expeditiously order appropriate remedial action, the operator should notify the Aztec district office of the Division any time the subject well is shut-in for 7 consecutive days.

(10) In order to allocate the commingled production to each of the commingled zones in the subject well, 52 percent of the total commingled production should be allocated to the Basin-Dakota zone, and 48 percent of the total commingled production to the Blanco-Mesaverde zone.

IT IS THEREFORE ORDERED THAT:

(1) The applicant, Tenneco Oil Company, is hereby authorized to commingle production from the Basin-Dakota and Blanco-Mesaverde Gas Pools within the wellbore of the Dawson "A" Well No. 1, located 790 feet from the South line and 1450 feet from the West line (Unit N) of Section 4, Township 27 North, Range 8 West, NMPM, San Juan County, New Mexico.

(2) Fifty-two percent of the total commingled production shall be allocated to the Basin-Dakota zone and 48 percent of the total commingled production shall be allocated to the Blanco-Mesaverde zone.

(3) The operator of the subject well shall immediately notify the Division's Aztec district office any time the well has been shut-in for 7 consecutive days and shall concurrently present, to the Division, a plan for remedial action.

(4) Jurisdiction of this cause is retained for the entry of such further orders as the Division may deem necessary.


-3-

Case No. 8764

Order No. R-8096

DONE at Santa Fe, New Mexico, on the day and year
hereinabove designated.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION


R. L. STAMETS,
Director

S E A L

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION

IN THE MATTER OF THE HEARING
CALLED BY THE OIL CONSERVATION
DIVISION FOR THE PURPOSE OF
CONSIDERING:

RECEIVED
DEC 20 1985
OIL CON. DIV. 1
DIST. 3

CASE NO. 8764
Order No. R-8096

APPLICATION OF TENNECO OIL COMPANY
FOR DOWNHOLE COMMINGLING,
SAN JUAN COUNTY, NEW MEXICO

ORDER OF THE DIVISION

BY THE DIVISION:

This cause came on for hearing at 8 a.m. on November 21, 1985, at Santa Fe, New Mexico, before Examiner Michael E. Stogner.

NOW, on this 18th day of December, 1985, the Division Director, having considered the testimony, the record, and the recommendations of the Examiner, and being fully advised in the premises,

FINDS THAT:

(1) Due public notice having been given as required by law, the Division has jurisdiction of this cause and the subject matter thereof.

(2) At the time of the hearing Cases Nos. 8762, 8763, 8764, and 8765 were consolidated for the purpose of testimony.

(3) The applicant, Tenneco Oil Company, is the owner and operator of the Dawson "A" Well No. 1, located 790 feet from the South line and 1450 feet from the West line (Unit N) of Section 4, Township 27 North, Range 8 West, NMPM, San Juan County, New Mexico.

(4) The applicant seeks authority to commingle production from the Basin-Dakota and Blanco-Mesaverde Gas Pools within the wellbore of the above-described well.

(5) From the Basin-Dakota zone, the subject well is capable of low marginal production only.

(6) From the Blanco-Mesaverde zone, the subject well is capable of low marginal production only.

(7) The proposed commingling should result in the recovery of additional hydrocarbons from each of the subject pools, thereby preventing waste, and will not violate correlative rights.

(8) The reservoir characteristics of each of the subject zones are such that underground waste would not be caused by the proposed commingling provided that the well is not shut-in for an extended period.

(9) To afford the Division the opportunity to assess the potential for waste and to expeditiously order appropriate remedial action, the operator should notify the Aztec district office of the Division any time the subject well is shut-in for 7 consecutive days.

(10) In order to allocate the commingled production to each of the commingled zones in the subject well, 52 percent of the total commingled production should be allocated to the Basin-Dakota zone, and 48 percent of the total commingled production to the Blanco-Mesaverde zone.

IT IS THEREFORE ORDERED THAT:

(1) The applicant, Tenneco Oil Company, is hereby authorized to commingle production from the Basin-Dakota and Blanco-Mesaverde Gas Pools within the wellbore of the Dawson "A" Well No. 1, located 790 feet from the South line and 1450 feet from the West line (Unit N) of Section 4, Township 27 North, Range 8 West, NMPM, San Juan County, New Mexico.

(2) Fifty-two percent of the total commingled production shall be allocated to the Basin-Dakota zone and 48 percent of the total commingled production shall be allocated to the Blanco-Mesaverde zone.


(3) The operator of the subject well shall immediately notify the Division's Aztec district office any time the well has been shut-in for 7 consecutive days and shall concurrently present, to the Division, a plan for remedial action.

(4) Jurisdiction of this cause is retained for the entry of such further orders as the Division may deem necessary.

-3-
Case No. 8764
Order No. R-8096

DONE at Santa Fe, New Mexico, on the day and year
hereinabove designated.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION


R. L. STAMETS,
Director

S E A L

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P.O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
NOV 16 1987
OIL CON. DIV.
DIST. 3

Operator Tenneco Oil Company	
Address P.O. Box 3249, Englewood, CO 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Condensate Change condensate transporter from Gary Energy to Conoco effective 12/1/87

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dawson A	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. * 29-005791
Location				
Unit Letter N	: 790	Feet From The South	Line and 1450	Feet From The West
Line of Section 4	Township 27N	Range 8W	NMPM San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

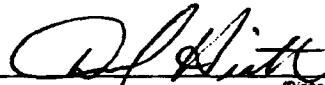
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Conoco	P.O. Box 460, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P.O. Box 4990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit: N Sec: 4 Twp: 27N Rge: 8W	Yes

If this production is commingled with that from any other lease or pool, give commingling order number _____

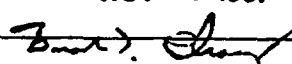
NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)
Sr. Administrative Analyst
(Title)
11/12/87
(Date)

OIL CONSERVATION DIVISION

APPROVED **NOV 16 1987**, 19_____
BY 
TITLE **SUPERVISION DISTRICT #3**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Amoco Production Company		Well AM No. 300451963-3004520091
Address 1670 Broadway, P. O. Box 800, Denver, Colorado 80201		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155		

II. DESCRIPTION OF WELL AND LEASE

Lease Name DAWSON A	Well No. 1	Pool Name, including Formation BASIN (DAKOTA) (P. 1000/014)	FEDERAL	Lease No. NH005791
Location Unit Letter N : 790 Feet From The FSL Line and 1450 Feet From The FWL Line Section 4 Township 27N Range 8W , NMPM , SAN JUAN County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> CONOCO	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1429, BLOOMFIELD, NM 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> EL PASO NATURAL GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1492, EL PASO, TX 79978
If well produces oil or liquids, give location of tanks.	Unit Soc. Twp. Rge. Is gas actually connected? When?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

J. L. Hampton
Signature
J. L. Hampton Sr. Staff Admin. Suprv.
Printed Name
January 16, 1989 **303-830-5025**
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **MAY 08 1989**

By *[Signature]*
SUPERVISION DISTRICT # 3

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Submit 3 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Amoco Production Company		Well API No. 3004511963-3004520031
Address 1670 Broadway, P. O. Box 800, Denver, Colorado 80201		
Reason(s) for filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator Tenneco Oil & P, 6162 S. Willow, Englewood, Colorado 80155		

II. DESCRIPTION OF WELL AND LEASE

Lease Name DAWSON A	Well No. 1	Pool Name, including Formation BASIN (DAKOTA)	FEDERAL	Lease No. NM005791
Location Unit Letter N : 790 Feet From The FSL Line and 1450 Feet From The FWL Line Section 4 Township 27N Range 8W , NMPM , SAN JUAN County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1429, BLOOMFIELD, NM 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1492, EL PASO, TX 79978
EL PASO NATURAL GAS COMPANY	
If well produces oil or liquids, give location of tanks.	Is gas actually connected? <input type="checkbox"/> When ?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

J. L. Hampton
Signature
J. L. Hampton Sr. Staff Admin. Suprv.
Printed Name
January 16, 1989 **303-830-5025**
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **MAY 08 1989**

By *[Signature]*
Title **SUPERVISION DISTRICT # 8**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator AMOCO PRODUCTION COMPANY		Well AM No. 300451196300
Address P.O. BOX 800, DENVER, COLORADO 80201		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input type="checkbox"/>		

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name DAWSON A	Well No. 1	Pool Name, including Formation BLANCO MESAVERDE (PRORATED GAS)	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter N 790 Feet From The FSL Line and 1450 Feet From The FWL Line Section 4 Township 27N Range 8W , NMPM , SAN JUAN County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> MERIDIAN OIL INC.	Address (Give address to which approved copy of this form is to be sent) 3535 EAST 30TH STREET, FARMINGTON, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492, EL PASO, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH		CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for DST 3 or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given above
is true and complete to the best of my knowledge and belief.

D. W. Whaley
Signature
Doug W. Whaley, Staff Admin. Supervisor
Printed Name Title
Date **July 5, 1990** Telephone No. **303-830-6280**

OIL CONSERVATION DIVISION

Date Approved **AUG 23 1990**

By *B. J. Shum*
Title **SUPERVISOR DISTRICT #3**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator AMOCO PRODUCTION COMPANY		Well API No. 300451196300
Address P.O. BOX 800, DENVER, COLORADO 80201		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name DAWSON A	Well No. 1	Pool Name, Including Formation BASIN DAKOTA (PRORATED GAS)	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter N	790	Feet From The FSL	Line and 1450	Feet From The FWL
Section 4	Township 27N	Range 8W	NMPM	SAN JUAN County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
MERIDIAN OIL INC.	3535 EAST 30TH STREET, FARMINGTON, NM 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
EL PASO NATURAL GAS COMPANY	P.O. BOX 1492, EL PASO, TX 79978
If well produces oil or liquids, give location of tanks.	Unit Soc. Twp. Rge. In gas actually connected? When?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH		CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for the depth of well for full 24 hours.)

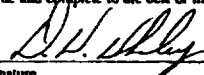
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

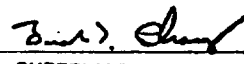
VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given above
is true and complete to the best of my knowledge and belief.


Signature
Doug W. Whaley, Staff Admin. Supervisor
Printed Name Title
July 5, 1990 **303-830-4280**
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **AUG 23 1990**

By 
Title **SUPERVISOR DISTRICT 12**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals

6. Lease Designation and Serial No.

NM-05791

8. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Dawson A #1

9. API Well No.

3004511963

10. Field and Pool, or Exploratory Area

Blanco MV/Basin DK

11. County or Parish, State

San Juan

New Mexico

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Amoco Production Company

Attention:

Trudy Frank

3. Address and Telephone No.

P.O. Box 800, Denver, Colorado 80201

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

790' FSL 1450'FWL Sec. 4 T 27N R 8W

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other RTP
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

The above referenced well was returned to production on 1/18/94 at 150 MCFD. The last day of production was 9/29/93.

RECEIVED
FEB 1 1994
OIL CON. DIV
DIST. 3

RECEIVED
BLM
94 JAN 26 PM 3:36
070 FARMINGTON, NM

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

Signed

Trudy Frank Trudy Frank

Title

Asset Team Assistant

Date

01-21-1994

(This space for Federal or State office use)

ACCEPTED FOR RECORD

Approved by

Title

Date

Conditions of approval, if any:

FEB 07 1994

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 representations as to any matter within its jurisdiction.

FARMINGTON DISTRICT OFFICE

BY *[Signature]*

* See Instructions on Reverse Side

NM000

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT - " for such proposals

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Designation and Serial No. NM-05791	
2. Name of Operator Amoco Production Company		6. If Indian, Allottee or Tribe Name	
Attention: Patty Haeefe		7. If Unit or CA, Agreement Designation	
3. Address and Telephone No. P.O. Box 800, Denver, CO 80201 (303) 830-4988		8. Well Name and No. Dawson A 1	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 790' FSL 1450' FWL Sec. 4 T 27N R 8W Unit N		9. API Well No. 3004520050	
		10. Field and Pool, or Exploratory Area Basin Dakota/Blanco Mesaverde	
		11. County or Parish, State San Juan Mexico	

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent <input type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other Reperf & acidize <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

13. 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.)*

Amoco Production Company requests permission to perform a workover per the attached procedure.

RECEIVED
M MAIL ROOM
APR 11 AM 11:24
BUREAU OF LAND MANAGEMENT, NM

RECEIVED
APR 15 1996
OIL CON. DIV.
DIST. 3

14. I hereby certify that the foregoing is true and correct	
Signed <u>Patty Haeefe</u>	Title <u>Staff Assistant</u>
(This space for Federal or State office use)	
Approved by _____	Title _____
Conditions of approval, if any:	
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 representations as to any matter within its jurisdiction.	

APPROVED
APR 11 1996
DISTRICT MANAGER
NMOCO

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
AMOCO PRODUCTION COMPANY

Attention:
Nancy I. Whitaker

3. Address and Telephone No.
P.O. BOX 800 DENVER, COLORADO 80201

303-830-5039

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

790 FSL

1450 FWL

Sec. 4 T 27N R 8W

UNIT N

5. Lease Designation and Serial No.

NM - 05791

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

DAWSON A

1

9. API Well No.

3004520050

10. Field and Pool, or Exploratory Area

Basin Dakota/Banco Mesaverde

11. County or Parish, State

SAN JUAN

NEW MEXICO

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☒ Altering Casing
☒ Other **DMD LTR DTD 6/5/97**
☒ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)

AMOCO PRODUCTION COMPANY HAS CANCELLED PLANS TO REPAIR THE ABOVE WELL.

RECEIVED
OIL FIELD
JUN 18 AM 9:13
OIL FIELD

RECEIVED
JUN 23 1997
OIL FIELD
DIST. 2

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

Signed

Nancy I. Whitaker

Title

Staff Assistant

Date

06-16-1997

(This space for Federal or State office use)

Approved by

/s/ Duane W. Spencer

Title

Date

JUN 16 1997

Conditions of approval, if any:

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.

AMOCO

* See Instructions on Reverse Side

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
811 South First, Artesia, NM 88210

District III
1000 RioBrazos Rd., Aztec, NM 87410

District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised October 18, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address CROSS TIMBERS OPERATING COMPANY 6001 Highway 64 Farmington, NM 87401		² OGRID Number 187067
		³ Reason for Filing Code 11/90 Change of Operator 12/1/97
⁴ API Number 30-045-20050	⁵ Pool Name BLANCO MESAVERDE	⁶ Pool Code 72319
⁷ Property Code	⁸ Property Name DAWSON A	⁹ Well Number 1

II. ¹⁰ Surface Location

UL or lot no. N	Section 04	Township 27N	Range 08W	Lot.Idn	Feet from the 790	North/South Line S	Feet from the 1450	East/West line W	County SJ
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¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Loc Code F	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
-------------------	--------------------------------------------------

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBDT	²⁹ Perforation	³⁰ DHC,DC,MC
³¹ Hole Size	³² Casing and Tubing Size	³³ Depth Set	³⁴ Sacks Cement		

VI. Well Test Data

³⁵ Date New Oil	³⁶ Gas Delivery Date	³⁷ Test Date	³⁸ Test Length	³⁹ Tbg. Pressure	⁴⁰ Csg. Pressure
⁴¹ Choke Size	⁴² Oil	⁴³ Water	⁴⁴ Gas	⁴⁵ AOF	⁴⁶ Test Method

⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Vaughn O. Vennerberg, II</i>		OIL CONSERVATION DIVISIO	
Printed Name: Vaughn O. Vennerberg, II		Approved by: Frank T. Chavez	
Title: Sr. Vice President-Land		Title: Supervisor District #3	
Date: December 1, 1997		Approval Date:	
Phone: (505) 832-5200			
⁴⁸ If this is a change of operator fill in the OGRID number and name of the previous operator			
<i>Gail Jefferson</i>		Amoco Production Company OGRID# 000778	
Previous Operator Signature		Senior Administrative Staff Assistant 12/01/97	
Printed Name		Title	
		Date	

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
811 South First, Artesia, NM 88210

District III
1000 RioBravo Rd., Aztec, NM 87410

District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised October 18, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address CROSS TIMBERS OPERATING COMPANY 6001 Highway 64 Farmington, NM 87401		² OGRID Number 167067
		³ Reason for Filing Code 11148 Change of Operator 4211757
⁴ API Number 30-045-20050	⁵ Pool Name BASIN DAKOTA	⁶ Pool Code 71599
⁷ Property Code	⁸ Property Name DAWSON A	⁹ Well Number 1

II. ¹⁰ Surface Location

UL or lot no. N	Section 04	Township 27N	Range 08W	Lot Idn	Feet from the 790	North/South Line S	Feet from the 1450	East/West line W	County SJ
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¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Loe Code F	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ OVG	²² POD ULSTR Location and Description

RECEIVED
DEC 1 9 1997

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
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OIL CON. DIV.
DIST. 3

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforation	³⁰ DRC,DC,MC
³¹ Hole Size	³² Casing and Tubing Size	³³ Depth Set	³⁴ Sacks Cement		

VI. Well Test Data

³⁵ Date New Oil	³⁶ Gas Delivery Date	³⁷ Test Date	³⁸ Test Length	³⁹ Tbg. Pressure	⁴⁰ Csg. Pressure
⁴¹ Choke Size	⁴² Oil	⁴³ Water	⁴⁴ Gas	⁴⁵ AOF	⁴⁶ Test Method

⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Vaughn O. Vernerberg, II</i>		OIL CONSERVATION DIVISIO	
Printed Name: Vaughn O. Vernerberg, II		Approved by: Frank T. Chavez	
Title: Sr. Vice President-Land		Title: Supervisor District #3	
Date: December 1, 1997		Approval Date:	
Phone: (505) 632-5200			
⁴⁸ If this is a change of operator fill in the OGRID number and name of the previous operator			
<i>Gail Jefferson</i> Previous Operator Signature		Amoco Production Company OGRID# 000778	
Printed Name: Gail Jefferson		Senior Administrative Staff Assistant	
Title: Senior Administrative Staff Assistant		Date: 12/01/97	

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Form C-104B
March 19, 2001

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Submit 1 copy of the final affected wells
list along with 1 copy of this form per
number of wells on that list to
appropriate District Office

Change of Operator Name

OGRID: 167067
Effective Date: 6/1/2001

Previous Operator Name and Information:

Name: Cross Timbers Operating Company
Address: 2700 Farmington Ave
Address: Building K, Suite 1
City, State, Zip: Farmington, NM 87401

New Operator Name and Information:

New Name: XTO Energy Inc.
Address: 2700 Farmington Ave
Address: Building K, Suite 1
City, State, Zip: Farmington, NM 87401

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given on this form and the attached list of wells is true and complete to the best of my knowledge and belief.

Signature: 
GARY L. MARKESTAD

Printed name: VICE-PRESIDENT, SAN JUAN REGION

Title: 5/23/01 505-324-1090 x-4001

Date: _____ Phone: _____



NMOCD Approval

Signature: _____

Printed Name: _____

District: _____

Date: _____

AP#	WELL NAME	ULSTR	COUNTY	LATITUDE	LONGITUDE	PITS	PITS	PITS
3004523990	JF DAY D #001E	P-20-27N-10W	SAN JUAN	36.64304	107.91282	Earth pit		
3004508460	JONES GAS CON C #001X	N-08-29N-11W	SAN JUAN	36.73348	108.01808	Earth pit		
3004507267	KUTZ FEDERAL #011	N-20-28N-10W	SAN JUAN	36.64327	107.92163	Earth pit		
3004526254	MURPHY D #002	13-27-30N-11W	SAN JUAN	36.77832	107.98431	Earth pit		
300451288	STOREY B LS #007	7-05-30N-11W	SAN JUAN	36.83894	108.01608	Earth pit		
3004525156	E H PIPKIN #021	O-35-28N-11W	SAN JUAN	36.61455	107.96943	Earth pit		
3004524880	MARTIN GAS COM B #001E	P-31-28N-10W	SAN JUAN	36.61465	107.93179	Earth pit		
3004506905	C A MCADAMS #003	3-05-27N-10W	SAN JUAN	36.60817	107.92187	Pit tank with cellar w/infill		
3004521058	C A MCADAMS #004	1-05-27N-10W	SAN JUAN	36.6092	107.91293	Pit tank with cellar w/infill		
3004506790	C A MCADAMS C #001	P-05-27N-10W	SAN JUAN	36.5996	107.91217	Pit tank with cellar w/infill		
3004506845	C A MCADAMS C #002	K-05-27N-10W	SAN JUAN	36.60269	107.92175	Pit tank with cellar w/infill		
3004506788	E H PIPKIN #008X	N-01-27N-11W	SAN JUAN	36.59998	107.95824	Pit tank with cellar w/infill		
3004506877	E H PIPKIN #010	E-01-27N-11W	SAN JUAN	36.60708	107.95975	Pit tank with cellar w/infill		
3004523781	E H PIPKIN #010E	H-01-27N-11W	SAN JUAN	36.60741	107.94843	Pit tank with cellar w/infill		
3004523783	E H PIPKIN #012E	E-12-27N-11W	SAN JUAN	36.59304	107.95983	Pit tank with cellar w/infill		
3004524962	E H PIPKIN #013	E-01-27N-11W	SAN JUAN	36.60699	107.96012	Pit tank with cellar w/infill		
3004525143	E H PIPKIN #016	L-01-27N-11W	SAN JUAN	36.60164	107.94943	Pit tank with cellar w/infill		
3004525150	E H PIPKIN #017	A-12-27N-11W	SAN JUAN	36.59438	107.94701	Pit tank with cellar w/infill		
3004525184	E H PIPKIN #020	H-01-27N-11W	SAN JUAN	36.60779	107.94858	Pit tank with cellar w/infill		
3004528345	E H PIPKIN #027	2-06-27N-10W	SAN JUAN	36.6088	107.9337	Pit tank with cellar w/infill		
3004506909	KUTZ J FEDERAL #002	E-33-27N-08W	SAN JUAN	36.53271	107.69311	Pit tank with cellar w/infill		
3004506143	BOLACK C LS #007	D-29-27N-08W	SAN JUAN	36.54299	107.70453	Pit tank with cellar w/infill		
3004526552	BOLACK C LS #012A	I-29-27N-08W	SAN JUAN	36.54951	107.71029	Pit tank with cellar w/infill		
3004506127	BOLACK C LS #013A	L-33-27N-08W	SAN JUAN	36.5281	107.69232	Pit tank with cellar w/infill		
3004526579	BOLACK C LS #015A	D-33-27N-08W	SAN JUAN	36.53436	107.6943	Pit tank with cellar w/infill		
3004506176	BOLACK C LS #016	A-33-27N-08W	SAN JUAN	36.53492	107.68214	Pit tank with cellar w/infill		
3004526662	BOLACK C LS #016A	I-33-27N-08W	SAN JUAN	36.52731	107.68242	Pit tank with cellar w/infill		
3004520050	DAWSON A #001	N-04-27N-08W	SAN JUAN	36.59875	107.68987	Pit tank with cellar w/infill		
3004511872	FLORANCE #064	O-17-27N-08W	SAN JUAN	36.55987	107.704	Pit tank with cellar w/infill		
3004511782	FLORANCE #068	P-20-27N-08W	SAN JUAN	36.5586	107.70545	Pit tank with cellar w/infill		
3004529718	FLORANCE #070	M-17-27N-08W	SAN JUAN	36.57025	107.7097	Pit tank with cellar w/infill		
3004506453	FLORANCE D LS #009	K-20-27N-08W	SAN JUAN	36.5715	107.70807	Pit tank with cellar w/infill		
3004506528	FLORANCE D LS #011	G-18-27N-08W	SAN JUAN	36.57807	107.71919	Pit tank with cellar w/infill		
3004506545	FLORANCE D LS #013	K-20-27N-08W	SAN JUAN	36.5715	107.70807	Pit tank with cellar w/infill		
3004524790	SCHWEDTFEGGER A #005E	O-06-27N-08W	SAN JUAN	36.60909	107.71577	Pit tank with cellar w/infill		
3004511888	SCHWEDTFEGGER A #005M	O-06-27N-08W	SAN JUAN	36.60016	107.71767	Pit tank with cellar w/infill		
3004506705	SCHWEDTFEGGER A LS #013	B-08-27N-08W	SAN JUAN	36.59366	107.70032	Pit tank with cellar w/infill		