



NSL 5/20/98

Mid-Continent Region  
Exploration/Production

Conoco Inc.  
10 Desta Drive, Suite 100W  
Midland, TX 79705-4500  
(915) 686-5400

April 17, 1998

Mr. Michael Stogner  
New Mexico Oil Conservation Division  
2040 Pacheco  
Santa Fe, New Mexico 87504



RE: Application for Unorthodox Coal Location  
Delhi Taylor D #1E  
API # 30-045-23796  
Section 3, T-26-N, R-11-W, D  
San Juan, New Mexico

Dear Mr. Stogner,

Conoco's Delhi Taylor D #1E is located in Section 3, T-26-N, R-11-W, 900 FNL & 900 FWL, San Juan County, New Mexico. In addition to standard 790' set back requirements, orthodox locations for 320 acres spaced Fruitland Coal requires that locations be situated in the NE/4 and/or SW/4 of any given section. The Delhi Taylor D #1E meets set back requirements but is situated in the NW/4 of Section 3; an orthodox location would be in the SW/4.

In order to prevent economic waste by allowing access to Basin Fruitland Coal reserves in an existing wellbore, Conoco respectfully requests that a NW/4, unorthodox location be approved for completion in the Basin Fruitland Coal Pool.

The offset operator plat shows that Larry F. Neely, Amoco, Merrion Oil & Gas, Burlington Resources, and Louis-Dreyfus are the offset operators that could be affected by this unorthodox location. Please find enclosed evidence that they have been notified of this application.

An unorthodox location order is requested based on the reasons given in the preceding paragraph. If there are further questions concerning this application please call me at (915) 686-5798.

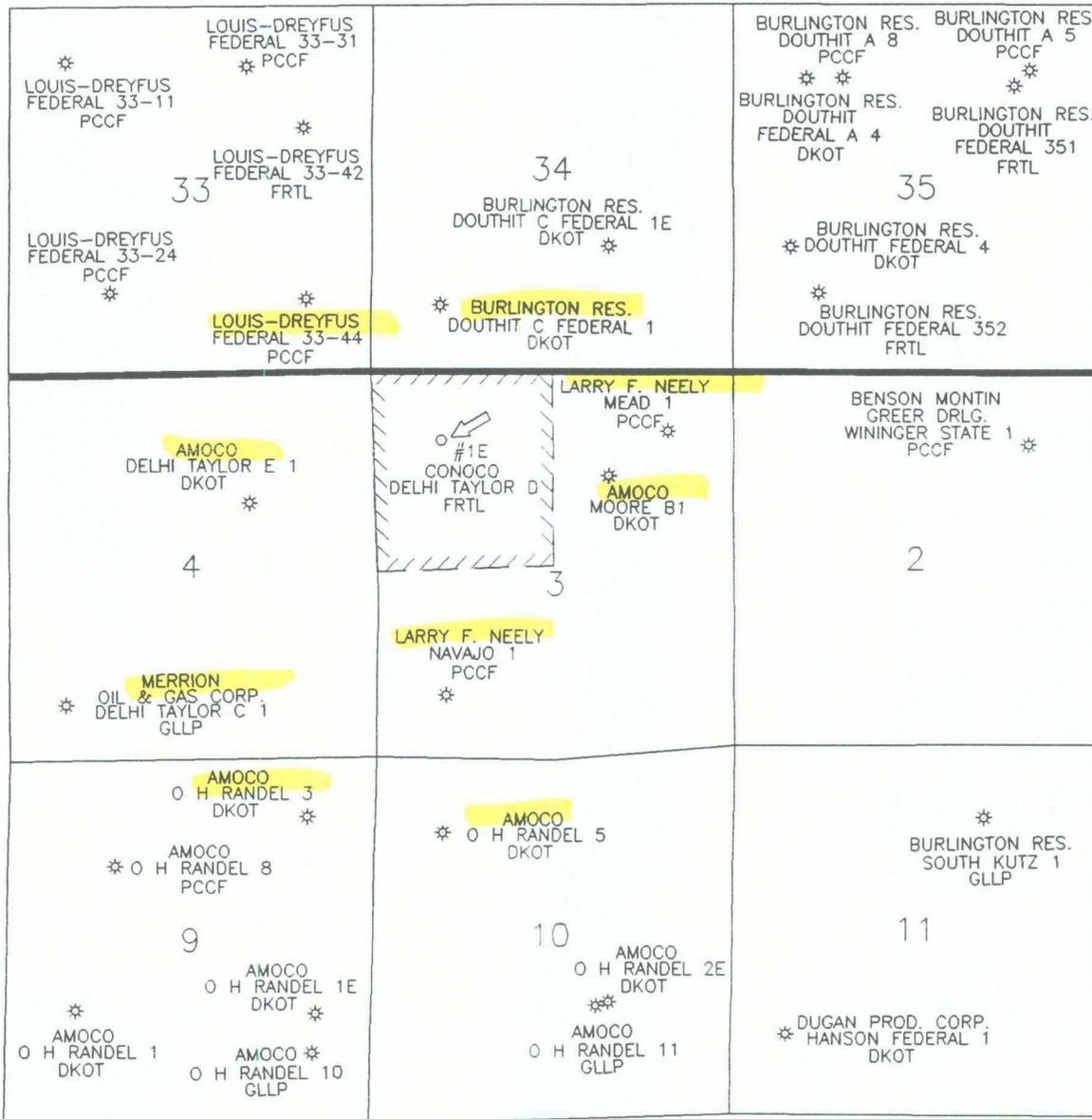
Sincerely,

Kay Maddox  
Regulatory Agent

Km/

Cc: Oil Conservation Division - Aztec  
Bureau Land Management-Farmington

# R I I W



T  
27  
N  
  
T  
26  
N



NOTES		EPNGNA MIDLAND DIVISION								
NOTE:	DATE: 4/27/98	CONOCO								
	DRAWN BY: GLG	DELHI TAYLOR D #1E								
	CHECKED BY:	UNORTHODOX LOCATION APPLICATION								
	APPROVED BY:	RIO ARRIBA COUNTY, NEW MEXICO								
	SCALE: 1" = 2640'	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">STATE</td> <td style="border: 1px solid black; padding: 2px;">API COUNTY</td> <td style="border: 1px solid black; padding: 2px;">WELL</td> <td style="border: 1px solid black; padding: 2px;">DRAWING</td> </tr> <tr> <td style="text-align: center;">30</td> <td style="text-align: center;">\ 039</td> <td style="text-align: center;">\ 237960</td> <td style="text-align: center;">DTAY_D1E</td> </tr> </table>	STATE	API COUNTY	WELL	DRAWING	30	\ 039	\ 237960	DTAY_D1E
STATE	API COUNTY	WELL	DRAWING							
30	\ 039	\ 237960	DTAY_D1E							
	STATE PLANE COORDINATES REFERRED TO NAD27 - N.M. WEST STATE PLANE COORDINATES ZONE - 3003	CONOCO INC. OFFICE 10 DESTA DRIVE WEST MIDLAND, TEXAS 79705								

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

State of New Mexico  
Energy, Minerals & Natural Resources Department

Revised February 21, 1994  
instructions on back

District II  
PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Submit to Appropriate District Office  
State Lease - 4 Copies  
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District III  
1000 Rio Brazos Rd. Aztec, NM 87410

District IV  
PO Box 2088, Santa Fe, NM 87504-2088

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 45 <del>30-039-23796</del>	2 Pool Code 71629	3 Pool Name Basin Fruitland Coal
4 Property Code 003039	5 Property Name Delhi Taylor D	6 Well Number #1E
7 OGRID No. 005073	8 Operator Name Conoco Inc., 10 Desta Drive, Ste. 100W, Midland, TX 79705-4500	9 Elevation 3404'

10 Surface Location

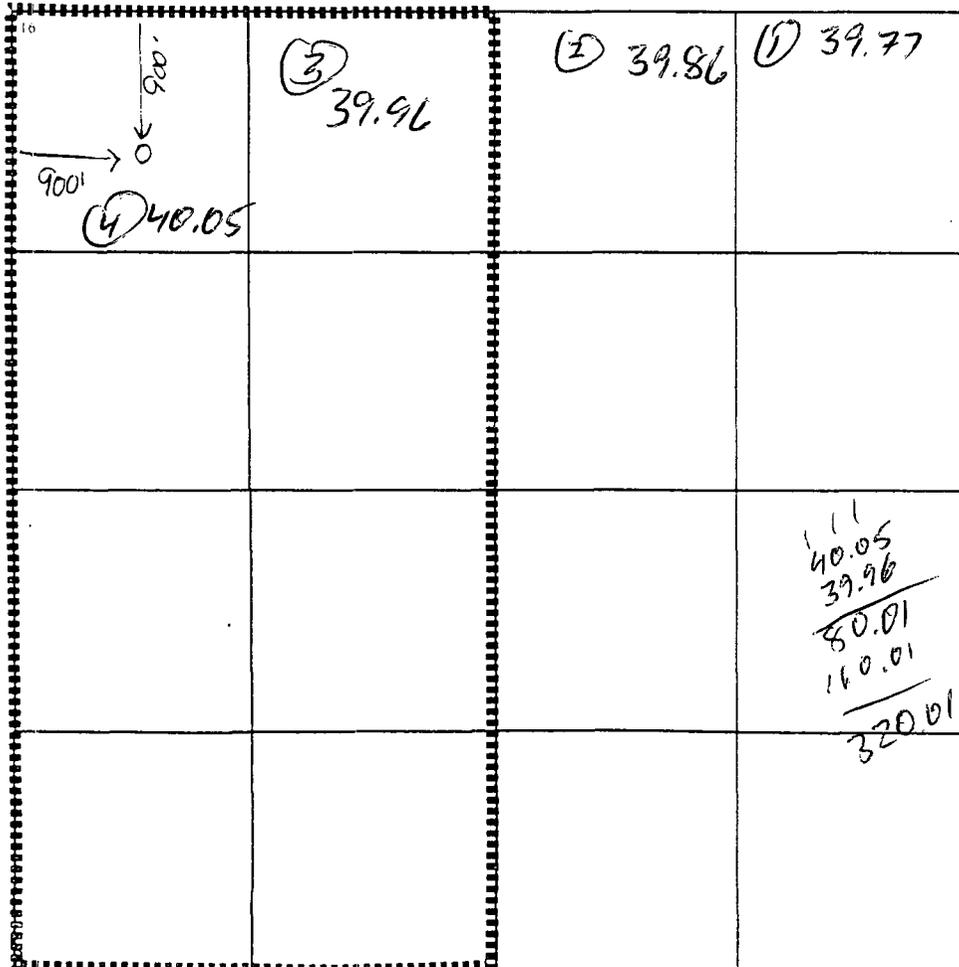
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	3	26N	11W		900	North	900	West	San Juan

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 320	13 Joint or Infill	14 Consolidation Code	15 Order No.
---------------------------	--------------------	-----------------------	--------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



17 OPERATOR CERTIFICATION

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

*Kay Maddox*  
Signature  
Kay Maddox

Printed Name  
Regulatory Agent

Title  
April 22, 1998

Date

18 SURVEYOR CERTIFICATION

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 belief.

Date of Survey  
Signature and Seal of Professional Surveyor:

Certificate Number

P 497 374 112

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for international Mail (See reverse)

Sent to <b>Amoco</b>	
Street & Number <b>PO Box 800</b>	
Post Office, State, & ZIP Code <b>Denver, CO 80201</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	

95

Return Receipt Showing to Whom & Date Delivered

P 497 374 114

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for international Mail (See reverse)

Sent to <b>Louis-Dreyfus</b>	
Street & Number <b>14000 Quail Springs Pkwy STE 600</b>	
Post Office, State, & ZIP Code <b>OKlahoma City, OK 73134-2600</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
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PS Form 3800, April 1995

Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

P 497 374 113

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
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Sent to <b>Burlington Resources</b>	
Street & Number <b>PO Box 4289</b>	
Post Office, State, & ZIP Code <b>Farmington, NM 87499</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	

P 497 374 047

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for international Mail (See reverse)

Sent to <b>LARRY F. Neely</b>	
Street & Number <b>PO Box 20657</b>	
Post Office, State, & ZIP Code <b>Albq. Nm 87154-0657</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	

P 497 374 111

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for international Mail (See reverse)

Sent to <b>Merrion O + G Corp</b>	
Street & Number <b>610 Reilly Ave</b>	
Post Office, State, & ZIP Code <b>Farmington, NM 87401</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995

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

5. Lease Designation and Serial No.

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
**Delhi Taylor D #1E**

9. API Well No.  
**30-045-237960**

10. Field and Pool, or Exploratory Area  
**Basin Fruitland Coal**

11. County or Parish, State  
**San Juan, NM**

**SUBMIT IN TRIPLICATE** UTO FARMINGTON, NM

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
**CONOCO INC.**

3. Address and Telephone No.  
**10 DESTA DR. STE. 100W, MIDLAND, TX. 79705-4500 (915) 686-5424**

4. Location of Well (Footage, Sec., T. R. M. or Survey Description)  
**Section 3, T-26-N, R-11-W, D  
990' FNL & 990' FWL**

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"/> Abandonment
<input type="checkbox"/> Subsequent Repon	<input checked="" 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 type="checkbox"/> Other _____
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracrunng
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Repon results of multiple completion Wd: 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.)\*

It is proposed to recomplete this well to the Fruitland Coal using the attached procedure.

\*\*\* An unorthodox location application will be submitted

**RECEIVED**  
APR 20 1998  
OIL CON. DIV.  
DIST. 3

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

Signed *Kay Maddox* Title Kay Maddox Date April 15, 1998  
 (This space for Federal or State office use)  
 Approved by */s/ Duane W. Spencer* Title \_\_\_\_\_ Date APR 28 1998  
 Conditions of approval if any: \_\_\_\_\_

BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FILE ROOM

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

\*See Instruction on Reverse Side

**NMOCD**

**Delhi Taylor D #1E  
Recomplete to Fruitland Coal  
April 6, 1998**

**API # -- 300452379600**

**LOCATION: Sec. 3, T- 26N, R - 11W, 900' FNL, 900' FWL, San Juan County.**

**Objective**

Funds in the amount of \$99,000 are requested to provide surface facilities, recomplete to the Fruitland Coal Formation (1665' -1722'), and test and temporarily abandon Dakota by setting a composite bridge plug over the Dakota. This recompletion should result in a production increase of 100 mcf.

**Wellbore Specs (See attached Wellview information)**

Spud 11-11-79, completed 1-8-80, completed in Dakota sands (6294' - 6384'), stimulation consisted of 1500 gals. 15% HCl acid squeeze, followed by fracture stimulation w/80,000 gals. 30# cross linked gel, & 105,000# 20/40 sand.

PBTD: 6430', TD: 6470'. **Note:** Error made in report listing TD as 6570' and PBTD as 6535'.

PROD. CASING: 4-1/2", 10.50#, K-55 ( 208 jts ) set @ 6470', DV tool @ 5168'.

Cement: 1<sup>st</sup> stage - 271 sxs 50/50 pozmix, 4% gel, tail in w/150 sxs w/2% CaCl,  
2<sup>nd</sup> stage - w/1590 sx 50/50 w/4% gel, total cement = 2011 sxs.

SURFACE CASING: 9-5/8", 43.5#, N-80, 13 joints set @ 504'.

TOC (Class "B" neat w/2% CaCl, cement, circ. to surf)

TUBING: 2-3/8", 4.7#, J-55, Landed @ 6293' w/SN one joint off bottom

**Note:** No packer in hole.

EXISTING PERFS: DAKOTA: 6294' - 6333', 6356' - 6384'

PROPOSED PERFS: Rough perf interval is 1665 -70 and 1715' -22'

Run a GR-Neutron log for perf correlation.

Engr to pick perfs based on GR-Neutron log.

**Delhi Taylor D #1E**  
**Recomplete to Fruitland Coal**  
**April 6, 1998**

**PROCEDURE**

**1. Pre Work**

- A. Locate and test deadman anchors. Spot flowback pit (20x20) and prepare. Inform operator of work to be done and time frame. Check for location size and equipment placement. Identify any hazards (power lines, H<sub>2</sub>S, tight equipment fits).
- B. Have pressure gauges on both casing and tubing when necessary (during acid, frac, testing).
- C. Hold Safety Meeting before rigging up to discuss potential hazards and meeting place in case of an emergency.

**2. Pull Tubing, Clean Out to PBTD, blow hole dry and Test Dakota**

- A. RU. Blow well down and kill with minimum amount of 1% KCl. NU BOP's
- B. POOH w/ 2 3/8" tbg string.
- C. RIH with 3.75" bit, 4 1/2" casing scraper and work string, clean out to PBTD (6430').
- D. Report fluid level and fill found in wellbore, test production to determine if Dakota production can be restored.
- E. Blow hole dry and POOH, bit, scraper & work string, standing back.
- F. RIH open ended tubing and test Dakota production, swab in if necessary. Obtain 4hr. stable flow rates. (report rates; pressures; etc for possible DHC application)
- G. POOH production test string standing back.

**3. Set Bridge Plug, Test Casing, and Log Fruitland Coal Interval**

- A. RU wireline. RIH and set EZ-Drill BP @ 6,250'. RD.
- B. Pressure test casing to 2500#, if it appears to be leaking RIH test string w/packer.
- C. Test BP, pick up and test until leak is isolated. Consult engineering on repair or additional BP set, and then notify regulatory agencies for approval.
- C. RU wireline, Run a GR-Neutron log for perf correlation. Rough perf interval is 1665 -70 and 1715' -22'

**Delhi Taylor D #1E**  
**Recomplete to Fruitland Coal**  
**April 6, 1998**

**4. Pick Perforation Depths & Perforate**

RU wireline select fire perforating gun and perforate the Fruitland Coal formation using a 3 1/8" HSC w/ .32" holes as follows (22 GRAMS OR HIGHER): Engr to pick perms based on GR-Neutron log.

**5. Acidize and Break Down Perforations**

- A. PU workstring & 4 1/2" pinpoint packer & RIH; break down each perforation with 1/2 barrel 15% HCl acid. POOH packer and workstring.
- B. Prepare to foam frac down casing if it tested OK or RIH frac string and packer.
- C. Proceed w/ single stage foam frac as per BJ attached procedure.
- D. Obtain 5, 10, 15 min ISIP shut-in pressures, then bleed off.

**6. Flow Back Clean Up & Return Well to Production**

Attempt to flow the FC back. If unsuccessful, POOH w/ frac string assembly (if run), RIH w/ production tubing w/SN & mule shoe on bottom & C/O to BP. Unload using air or gas, pull up and land tubing end at mid perms FC. Install plunger & put in swab mode; put on production.. Monitor well for rate at least one week.

---

West Team

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

District II  
PO Drawer DD, Artesia, NM 88211-0719

District III  
1000 Rio Brazos Rd. Aztec, NM 87410

District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

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Form C-102

Revised February 21, 1994

instructions on back

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070 FARMINGTON, NM  AMENDED REPORT

### WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-23796		2 Pool Code 71629		3 Pool Name Basin Fruitland Coal	
4 Property Code 003039		5 Property Name Delhi Taylor D			6 Well Number #1E
7 OGRID No. 005073		8 Operator Name Conoco Inc., 10 Desta Drive, Ste. 100W, Midland, TX 79705-4500			9 Elevation 3404'

#### 10 Surface Location

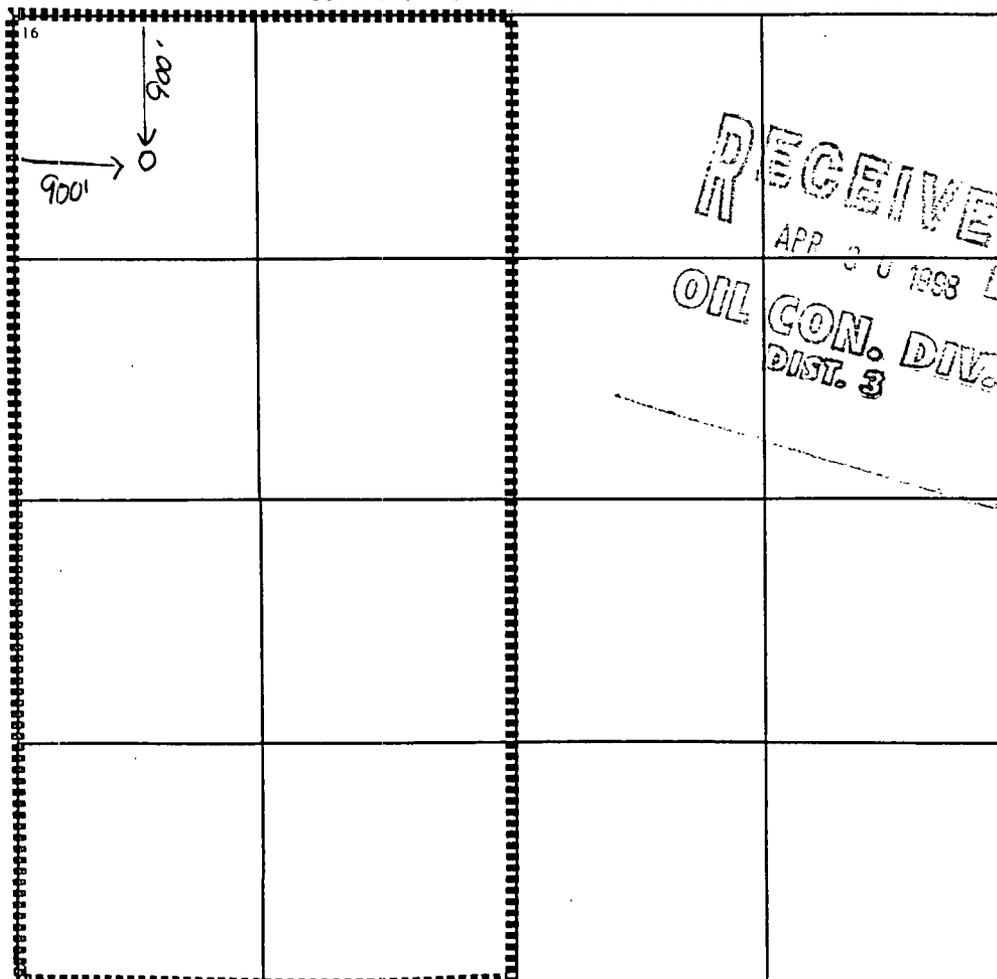
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	3	26N	11W		900	North	900	West	San Juan

#### 11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 320	13 Joint or Infill	14 Consolidation Code	15 Order No.
---------------------------	--------------------	-----------------------	--------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



#### 17 OPERATOR CERTIFICATION

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

Signature: *Kay Maddox*

Printed Name: Kay Maddox

Title: Regulatory Agent

Date: April 22, 1998

Date

#### 18 SURVEYOR CERTIFICATION

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 belief.

Date of Survey

Signature and Seal of Professional Surveyor:

Certificate Number



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

5. Lease Designation and Serial No.  
SF-078641-A

6. If Indian, Allottee or Tribe Name

7. Well Name and No.  
Delhi Taylor PUD 1-E

8. API Well No.  
3004523796

9. Field and Pool, or Exploratory Area  
Basin Dakota

10. County or Parish, State  
San Juan New Mexico

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator Attention:  
Amoco Production Company Pat Archuleta, Room 1205C

3. Address and Telephone No.  
P.O. Box 800, Denver, Colorado 80201 (303) 830-5217

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
990'FNL 990'FWL Sec. 03 T 26N R 11W Unit D

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"/> Abandonment
<input 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 Letter 9/20/96
	<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 plug and abandon this well per the attached procedures.

Reference letter NMSF-078641A (WC) 3162.3-4 (7400).

If you have any questions contact Dave Smith at (3003) 830-4502.

RECEIVED  
BLM  
96 NOV 22 AM 9:50  
070 FARMINGTON, N.M.

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

Signed Pat Archuleta

Title Staff Assistant Date 11-20-1996

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_  
Conditions of approval, if any:

**APPROVED**

DEC 02 1996

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.

DISTRICT MANAGER  
/s/ Duane W. Spencer

Delhi Taylor PUD #1E  
Orig. Comp. 12/79  
TD = 6470', PBTD = 6430'  
Page 2 of 2

1. Check location for anchors. Install if necessary. Test anchors.
2. MIRUSU. Blow down well. Kill if necessary with fresh water. NDWH. NUBOP.
3. POOH with 2 3/8" tbg. RIH with tbg and CIBP. Set CIBP at 6244'. Test csg integrity to 500#. Spot 100' cement plug on top of CIBP. (13 cuft cement). Pull up hole and spot 100' cement plug across the Mesaverde at 3245' to 3345'. (13 cuft cement), Chacra at 2579' to 2679'. (13 cuft cement), Pictured Cliff at 1670' to 1770'. (13 cuft cement), Fruitland at 1411' to 1511'. (13 cuft cement), Ojo Alamo at 630' to 730'. (13 cuft cement), and 504' to surface. (50 cuft cement).
4. NDBOP. Cut off casing and wellhead. Install PXA marker according to BLM or State requirements.
5. Contact FMC and ship surface equipment to yard or other location per instructions.
6. Turn over to John Schwartz for reclamation.
7. Rehabilitate location according to BLM or State requirements.

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

District II  
PO Drawer DD, Artesia, NM 88211-0719

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

District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico CONSERVATION DIVISION  
Energy, Minerals & Natural Resources  
Department

97957501  
Form C-104  
Revised February 21, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

AMENDED REPORT

95 JUN 26 10 18 32

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address AMOCO PRODUCTION COMPANY 200 AMOCO COURT FARMINGTON, NM 87401		<sup>2</sup> OGRID Number 000778
		<sup>3</sup> Reason for Filing Code CO
<sup>4</sup> Well Number 30-152379600	<sup>5</sup> Pool Name BASIN-DAKOTA-GAS	<sup>6</sup> Pool Code 071599
<sup>7</sup> Property Code 00429	<sup>8</sup> Property Name DELHI TAYLOR D 1&1E	<sup>9</sup> Well Number 1E

II. <sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
D	0003	026	011		990	N	990	W	SAN JUAN

<sup>11</sup> 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
<sup>12</sup> Use Code E	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGI#	<sup>19</sup> Transporter Name and Address	<sup>20</sup> POD	<sup>21</sup> O/G	<sup>22</sup> POD ULSTR Location and Description
018	GIANT REFINING BOX 1999 SCOTTSDALE AZ 85267	0166510	O	
7057	EPNG P.O. BOX 4990 FARMINGTON NM 87499	0166530	G	

IV. Produced Water

POD	<sup>24</sup> POD ULSTR Location and Description

V. Well Completion Data

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBSD	<sup>29</sup> Perforations
<sup>30</sup> Hole Size	<sup>31</sup> Casing & Tubing Size	<sup>32</sup> Depth Set	<sup>33</sup> Sacks Cement	

VI. Well Test Data

<sup>34</sup> Date New Oil	<sup>35</sup> Date Delivery Date	<sup>36</sup> Test Date	<sup>37</sup> Test Length	<sup>38</sup> Tbg. Pressure	<sup>39</sup> Csg. Pressure
<sup>40</sup> Casing Size	<sup>41</sup> Oil	<sup>42</sup> Water	<sup>43</sup> Gas	<sup>44</sup> AOF	<sup>45</sup> Test Method

<sup>46</sup> 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.	<p>OIL CONSERVATION DIVISION</p> <p>Approved by: <i>J.P. Shaheen</i></p> <p>Title: SUPERVISOR DISTRICT #5</p> <p>Approval Date: SEP 27 1995</p>
Signature: J. P. Shaheen	
Printed Name: J. P. SHAAHEEN	
Title: SENIOR BUSINESS ANALYST	
Date: 9/27/95	Phone: (505) 326-9413

**OIL CONSERVATION DIVISION**

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

**I.**

Operator <b>Amoco Production Company</b>	Well APN No. <b>3004523796</b>
Address <b>1670 Broadway, P. O. Box 800, Denver, Colorado 80201</b>	
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 <b>Tenneco Oil E &amp; P, 6162 S. Willow, Englewood, Colorado 80155</b>	

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AUG 4 1989  
OIL CONSERVATION DIV.  
SANTA FE

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>DELHI TAYLOR D</b>	Well No. <b>1E</b>	Pool Name, Including Formation <b>BASIN (DAKOTA)</b>	FEDERAL	Lease No. <b>SF079232</b>
Location Unit Letter <b>D</b> : <b>900-990</b> Feet From The <b>FNL</b> Line and <b>900-990</b> Feet From The <b>FWL</b> Line Section <b>3</b> Township <b>26N</b> Range <b>11W</b> , NMPM, <b>SAN JUAN</b> 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)
<b>GIANT REFINING</b>	<b>P. O. BOX 256, FARMINGTON, NM 87499</b>
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)
<b>EL PASO NATURAL GAS COMPANY</b>	<b>P. O. BOX 1492, EL PASO, TX 79978</b>
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, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations							Depth Casing Shoe	
<b>TUBING, CASING AND CEMENTING RECORD</b>								
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 (pitot, 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 Title  
**January 16, 1989** **303-830-5025**  
Date Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved \_\_\_\_\_  
**FEB 08 1989**  
By \_\_\_\_\_  
*Bill D. Shaw*  
Title \_\_\_\_\_  
**SUPERVISION 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.

Corrected

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-1 Effective 1-1-65

30-045-23796

DISTRIBUTION	
SANTA FE	/
FILE	/
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL /
	GAS /
OPERATOR	2
PRORATION OFFICE	

I. Operator  
 Tenneco Oil Company  
 Address  
 720 S. Colorado Blvd., Denver, CO 80222

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)  
 JUN 19 1980  
 RECEIVED  
 OIL CONSERVATION DIVISION

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE SF-078641-A

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Delhi Taylor <del>W.D.</del>	1-E	Basin Dakota	State, Federal or Fee Federal	

Location  
 Unit Letter D ; ~~200~~ Feet From The North Line and ~~200~~ Feet From The West  
 Line of Section 3 Township 26N Range 11W , 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)
Giant Refining	P.O. Box 256, Farmington, NM 87401
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	P.O. Box 990, Farmington, NM 87401

If well produces oil or liquids, give location of tanks.  
 Unit D Sec. 3 Twp. 26N Rge. 11W Is gas actually connected? No When ASAP

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.
		X	X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11/11/79	1/8/80	6570'	6535'
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6272'GL	Basin Dakota	6294'	6293'
Perforations	TUBING, CASING, AND CEMENTING RECORD		Depth Casing Shoe
6294'-6384' (Dakota)			

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8 5/8"	504'	325 SXS
7 7/8"	4 1/2"	6570'	2011 SXS
	2 3/8"	6293'	

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
938	3 hrs		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
back pressure	625	650	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.

*Charles J. ...*  
 Administrative Supervisor  
 1/17/80

OIL CONSERVATION COMMISSION  
 FEB 1 1980

APPROVED \_\_\_\_\_, 19\_\_\_\_  
 BY Original Signed by FRANK T CHAVEZ  
 TITLE SUPERVISOR 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 Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
 Separate Form C-104 must be filed for each pool in multiple

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

**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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR

Tenenco Oil Company

3. ADDRESS OF OPERATOR

720 S. Colo. Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

900'FNL, 900'FWL, Unit D

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF   
 FRACTURE TREAT   
 SHOOT OR ACIDIZE   
 REPAIR WELL   
 PULL OR ALTER CASING   
 MULTIPLE COMPLETE   
 CHANGE ZONES   
 ABANDON\*

(other) cement tops

5. LEASE SF-078641-A	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Delhi-Taylor <del>AD</del>	
9. WELL NO. 1E	
10. FIELD OR WILDCAT NAME Basin Dakota	
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA Sec. 3; T26N; R11W	
12. COUNTY OR PARISH San Juan	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS: (SHOW DF, KDB, AND WD) 6272'GL	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

2/14/80

The cement was circulated to surface behind the 8 5/8" and 4 1/2" casings

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED Carley Vetter TITLE Admin. Supervisor DATE 2/15/80

(This space for Federal or State office use)

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

RECEIVED FOR RECORD  
 FEB 15 1980  
 BY M. L. Richers  
 STRICT

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
Tenenco Oil Company

3. ADDRESS OF OPERATOR  
720 S. Colo. Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 900'FNL, 900'FWL, Unit D  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

5. LEASE  
SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Delhi-Taylor #3D

9. WELL NO.  
1E

10. FIELD OR WILDCAT NAME  
Basin Dakota

11. SEC., T., R., ME OR BLK. AND SURVEY OR AREA  
Sec. 3; T26N; R11W

12. COUNTY OR PARISH | 13. STATE  
San Juan | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6272'GL

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other) <u>cement tops</u>			

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

2/14/80

The cement was circulated to surface behind the 8 5/8" and 4 1/2" casings

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Ft.

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

SIGNED Carley Statton TITLE Admin. Supervisor DATE 2/15/80

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD  
FEB 15 1980  
M.L. Richero

EL PASO NATURAL GAS COMPANY  
POST OFFICE BOX 990  
FARMINGTON, NEW MEXICO

RECEIVED  
FEB 26 1981  
OIL CONSERVATION DIVISION  
SANTA FE

NOTICE OF GAS CONNECTION

(4)

DATE February 23, 1981

THIS IS TO NOTIFY THE OIL CONSERVATION COMMISSION THAT CONNECTION FOR PURCHASE OF

GAS FROM Tenneco Oil Company  
Operator

Delhi Taylor D#1-E  
Well Name

93-487-01                      74820-51  
Meter Code                      Site Code

D                                      3-26-11  
Well Unit                              S-T-R

Basin Dakota  
Pool

El Paso Natural Gas Company  
Name of Purchaser

WAS MADE ON 2-4-81  
Date

FIRST DELIVERY 2-9-81  
Date

AOF 938

CHOKE 863

El Paso Natural Gas Company  
Purchaser

Original Signed By W. M. KENNEDY

Representative

Chief Dispatcher  
Title

cc: Operator  
Oil Conservation Commission - 2  
Proration - El Paso

File

**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.

5. LEASE DESIGNATION AND SERIAL NO.

SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

~~I 149 INB 9108~~

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Delhi Taylor **20D**

9. WELL NO.

1-E

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

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

Sec. 3; T26N; R11W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG \***

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other \_\_\_\_\_

2. NAME OF OPERATOR  
Tenneco Oil Company

3. ADDRESS OF OPERATOR  
720 S. Colorado Blvd., Denver, CO 80222

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 900'FNL, 900'FWL, Unit D  
At top prod. interval reported below NW/4, NW/4  
At total depth

**RECEIVED**  
FEB 24 1980

14. PERMIT NO. \_\_\_\_\_ DATE ISSUED \_\_\_\_\_

15. DATE SPOUDED 11/11/79 16. DATE T.D. REACHED 11/21/79 17. DATE COMPL. (Ready to prod.) 11/21/80 18. ELEVATIONS (DF, REB, RT, CR, ETC.)\* 6272'GL 19. ELEV. CASINGHEAD \_\_\_\_\_

20. TOTAL DEPTH, MD & TVD 6570' 21. PLUG, BACK T.D. MD & TVD 6535' 22. IF MULTIPLE COMPL. HOW MANY\* \_\_\_\_\_ 23. INTERVALS DRILLED BY 0-TD 24. ROTARY TOOLS: No 25. CABLE TOOLS: No

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*  
6294'-6384' (Dakota)

26. TYPE ELECTRIC AND OTHER LOGS RUN  
Induction-GR, Densilog

27. WAS WELL CORED No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	K-55, 24#	504'	12 1/4"	325 sxs	
4 1/2"	K-55, 10.5#	6570'	7 7/8"	2011 sxs	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8"	6293'	

31. PERFORATION RECORD (Interval, size and number)

6294-6333 (2 SPF) (134 holes)  
6356-6384

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6294-6384	1500 gal. 15% HCL 105,000# sand 80000 gal. 30% crosslinked gel.

33. PRODUCTION

DATE FIRST PRODUCTION 1/16/80 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing WELL STATUS: (Producing or shut-in) shut-in

DATE OF TEST 1/8/80 HOURS TESTED 3 CHOKER SIZE 3/4 PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF. Q=863 WATER—BBL. GAS-OIL RATIO

FLOW. TUBING PRESS. 52 CASING PRESSURE 203 CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF. AOF=938 WATER—BBL. OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented TEST WITNESSED BY

35. LIST OF ATTACHMENTS  
Electric logs forwarded by Dresser Atlas

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Carly Hatten TITLE Admin. Supervisor DATE 1/21/80

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

**OPERATOR**

# 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 33, 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: "Secks 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.)

FORMATION	SUMMARY OF POROUS ZONES:		DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS	
	TOP	BOTTOM			NAME	MEAS. DEPTH
Ojo Alamo	680	790	sand, water		Greenhorn	6128
Pictured Cliffs	1720	1800	sand, water			
Chacra	2630	2725	sand, water			
Cliffhouse	3335	3350	sand, water			
Point Lookout	4150	4470	sand, shale, water			
Gallup	5340	5640	shaly sand, oil			
Dakota	6294	6416	sand, gas			
Morrison	6416	TD(6470)	sand, water			

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved,  
Budget Bureau No. 42-R355-B

WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other \_\_\_\_\_

2. NAME OF OPERATOR  
Tenneco Oil Company

3. ADDRESS OF OPERATOR  
720 S. Colorado Blvd., Denver, CO 80222

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 900' FNL, 900' FWL, Unit D  
At top prod. interval reported below NW/4, NW/4  
At total depth \_\_\_\_\_

14. PERMIT NO. \_\_\_\_\_ DATE ISSUED \_\_\_\_\_

5. LEASE DESIGNATION AND SERIAL NO.

SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1-149-IND-9108-

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Delhi Taylor D

9. WELL NO.

1-E

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

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

Sec. 3; T26N; R11W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

15. DATE SPUNDED 11/11/79 16. DATE T.D. REACHED 11/21/79 17. DATE COMPL. (Ready to prod.) 1/8/80 18. ELEVATIONS (DF, REB, RT, GR, ETC.)\* 6272' GL 19. ELEV. CASINGHEAD \_\_\_\_\_

20. TOTAL DEPTH, MD & TVD 6570' 21. PLUG, BACK I.D., MD & TVD 6535' 22. IF MULTIPLE COMPL., HOW MANY\* \_\_\_\_\_ 23. INTERVALS DRILLED BY \_\_\_\_\_ ROTARY TOOLS 0-TD CABLE TOOLS No

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 6294'-6384' (Dakota) 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN Induction-GR, Densilog 27. WAS WELL CORDED No

29. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	K-55, 24#	504'	12 1/4"	325 SXS	
4 1/2"	K-55, 10.5#	6570'	7 7/8"	2011 SXS	

30. LINER RECORD vs TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	6293'	

31. PERFORATION RECORD (Interval, size and number) 6294-6333 (2 SPF) (134 holes) 6356-6384

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6294-6384	1500 gal 15% HCL 105,000# sand 80000 gal 30# crosslinked gel

33. PRODUCTION

DATE FIRST PRODUCTION 1/16/80 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing WELL STATUS (Producing or shut-in) shut-in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1/3/80	3	3/4	→		Q=863		

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
52	203	→		AOF=938		

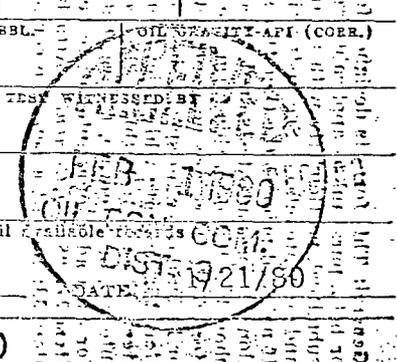
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented TEST WITNESSED BY \_\_\_\_\_

35. LIST OF ATTACHMENTS Electric logs forwarded by Dresser Atlas

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Carly J. Hatcher TITLE Admin. Supervisor DATE 1/21/80

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



NM0001

# 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 33; 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.)

FORMATION	SUMMARY OF POROUS ZONES:		DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS	
	TOP	BOTTOM		NAME	MEAS. DEPTH
Ojo Alamo	680	790	sand, water		
Pictured Cliffs	1720	1800	sand, water	Greenhorn	6128
Chacra	2630	2725	sand, water		
Cliffhouse	3335	3350	sand, water		
Point Lookout	4150	4470	sand, shale, water		
Gallup	5340	5640	shaly sand, oil		
Dakota	6294	6416	sand, gas		
Norrison	6416	TD (6470)	sand, water		

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
Tenneco Oil Company

3. ADDRESS OF OPERATOR  
720 S. Colorado Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 900'FNL, 900'FWL, Unit D  
AT TOP PROD. INTERVAL: NW/4 NW/4  
AT TOTAL DEPTH:

5. LEASE  
SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
I-149-IND-9108

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME  
Dehli Taylor ~~Tr.~~ D.

9. WELL NO.  
1-E

10. FIELD OR WILDCAT NAME  
Basin Dakota

11. SEC., T., R., M.; OR BLK. AND SURVEY OR AREA  
Sec. 3; T26N; R11W

12. COUNTY OR PARISH  
San Juan

13. STATE  
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6272'GL

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) Status: spud, surface, production csg.	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

11/11/79-12/10/79

Spudded 12 1/4" hole 11/11/79. Ran and set 8 5/8", K-55, 24# csg @ 504'. Cmt w/325 sxs class B neat w/2% CACL2. WOC 12 hrs. Reduced hole to 7 7/8". Reached TD of 6570' on 11/21. Ran and set 4 1/2", 10.5# K-55 csg @ 6470'. Cmt first stage w/271 sxs of 50/50 Pozmix w/4% gel and tailed w/150 wxs w/2% CACL2 (421 total). Cmt second stage w/1590 sxs 50/50 Pozmix w/4% gel. PDBPO. 12/10 WOCU.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED Carley Johnson TITLE Admin. Supervisor DATE 7/17/80

(This space for Federal or State office use)

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

NMOCC

DISTRIBUTION		
SANTA FE	1	✓
FILE	1	
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL 1	
	GAS 1	
OPERATOR	2	
PRORATION 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-110  
Effective 1-1-65

30-045-23796

**I. OPERATOR**

Operator: Tenneco Oil Company

Address: 720 S. Colorado Blvd., Denver, CO 80222

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

SF-078641-A

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
<u>Delhi Taylor</u>	<u>1-E</u>	<u>Basin Dakota</u>	<u>State, Federal or Fee Federal</u>	
Location				
Unit Letter <u>D</u>	<u>990</u>	Feet From The <u>North</u>	Line and <u>990</u>	Feet From The <u>West</u>
Line of Section <u>3</u>	Township <u>26N</u>	Range <u>11W</u>	<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>Giant Refining</u>	<u>P.O. Box 256, Farmington, NM 87401</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</u>	<u>P.O. Box 990, Farmington, NM 87401</u>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	<u>D</u>	<u>3</u>	<u>26N</u>	<u>11W</u>	<u>No</u>	<u>ASAP</u>

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.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
<u>11/11/79</u>	<u>1/8/80</u>	<u>6570'</u>	<u>6535'</u>					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
<u>6272'GL</u>	<u>Basin Dakota</u>	<u>6294'</u>	<u>6293'</u>					
Perforations	Depth Casing Shoe							
<u>6294'-6384' (Dakota)</u>								
<b>TUBING, CASING, AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<u>12 1/2"</u>	<u>8 5/8"</u>	<u>504'</u>	<u>325 SXS</u>					
<u>7 7/8"</u>	<u>4 1/2"</u>	<u>6570'</u>	<u>2011 SXS</u>					
	<u>2 3/8"</u>	<u>6293'</u>						

**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.)	
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Water-Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbls.		

**GAS WELL**

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
<u>938</u>	<u>3 hrs</u>		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
<u>back pressure</u>	<u>625</u>	<u>650</u>	<u>3/4"</u>

**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.

Carly Hattson  
(Signature)  
Administrative Supervisor  
(Title)  
1/17/80  
(Date)

OIL CONSERVATION COMMISSION  
2-1-80 FEB 1 1980

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Frank S. Clary  
TITLE SUPERVISOR 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 Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Form C-104 must be filed for each pool in multiple

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
Tenneco Oil Company

3. ADDRESS OF OPERATOR  
720 S. Colorado Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 990'FNL 900'FWL, Unit D  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

5. LEASE  
SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
~~T 149 IND 9108~~

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME  
Dehli-Taylor ~~W.D.~~

9. WELL NO.  
1-E

10. FIELD OR WILDCAT NAME  
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 3; T26N; R11W

12. COUNTY OR PARISH | 13. STATE  
San Juan | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6272'FL

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) Status Report: Completion	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

12/21/79-1/16/80

MIRUCU. Spotted 500 gal 7½% acid. Perf'd Dakota @ 6294'-6333' and 6356'-6384'. Acidized w/1500 gal 15% HCL and 198 holes. Frac'd w/105,000# sand in 80,000 gal 30# crosslinked gel. Landed 2 3/8" tubing @ 6293' RDMSU on 12/28. Well died overnight. Moved on swabbing unit MIRUSU 1/2/80. Made 3 swab runs until flowing. On 1/8, shut in well pending AOF test.

JAN 28 1980  
SANTA FE

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED Carley Station Admin. Supervisor DATE 1/17/80

(This space for Federal or State office use)

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

NMOCC

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
Tenneco Oil Company

3. ADDRESS OF OPERATOR  
720 S. Colorado Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 900'FNL, 900'FWL, Unit D  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

5. LEASE  
SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
I-149-IND-9108

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Delhi-Taylor ~~W.D.~~

9. WELL NO.  
I-E

10. FIELD OR WILDCAT NAME  
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 3, T26N, R11W

12. COUNTY OR PARISH | 13. STATE  
San Juan | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6272'GL

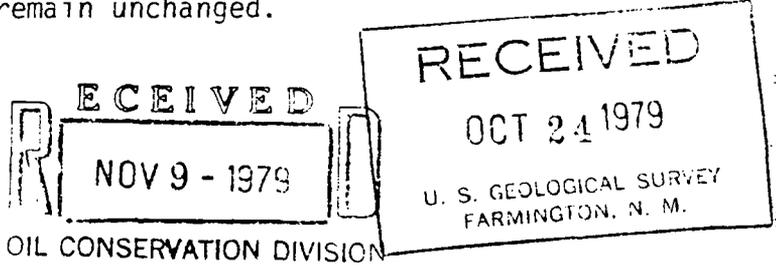
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <u>change in drilling program</u> (other)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

We would like to change the drilling program for this well to utilize 4 1/2" 10.5# K-55 csg, rather than 5 1/2", 15.5# and 17#, K-55 csg, as indicated on the original Application for Permit to Drill. All other data will remain unchanged.



Subsurface Safety Valve: Manu. and Type SANTA FE Set @ \_\_\_\_\_ Ft.

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

SIGNED [Signature] TITLE Admin. Supervisor DATE 10/17/79

(This space for Federal or State office use)

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

\*See Instructions on Reverse Side

*Okal*

NMOCC

All distances must be from the outer boundaries of the Section.

Operator <b>TENNECO OIL COMPANY</b>		Lease <b>DELHI-TAYLOR <del>W.D.</del></b>		Well No. <b>1-E</b>
Unit Letter <b>D</b>	Section <b>3</b>	Township <b>26N</b>	Range <b>11W</b>	County <b>San Juan</b>

Actual Footage Location of Well:

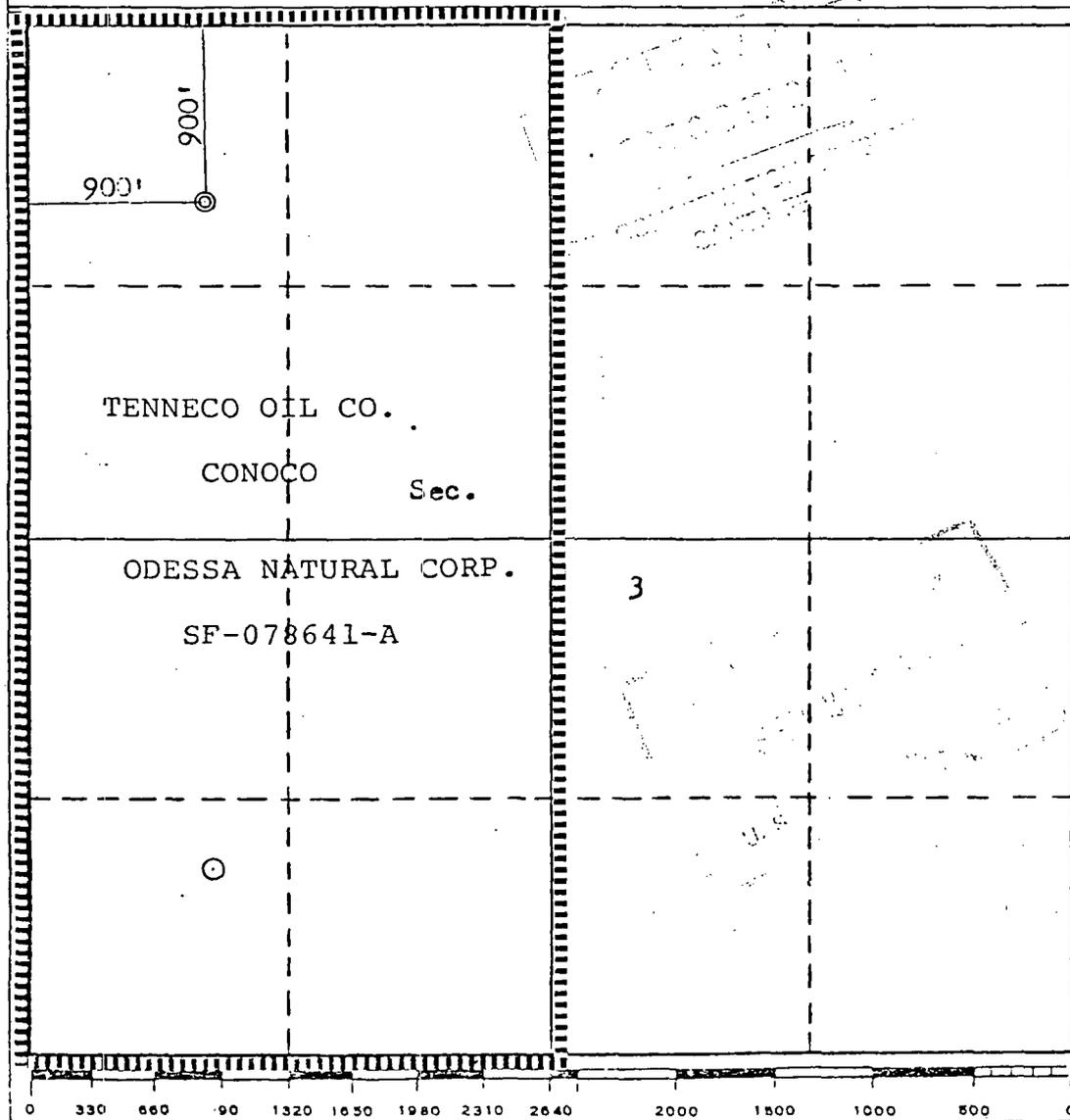
<b>900</b>	feet from the	<b>North</b>	line and	<b>900</b>	feet from the	<b>West</b>	line
Ground Level Elev. <b>6272</b>	Producing Formation <b>Dakota</b>		Pool <b>Basin Dakota</b>	Dedicated Acreage: <input checked="" type="checkbox"/> <b>320.01</b> Acres			

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

Yes  No If answer is "yes," type of consolidation Communitized

If answer is "no," list the owners and tract descriptions which have actually been 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.

Name J. A. Rusk  
 Position Environmental Coordinator  
 Company Tenneco Oil Company  
 Date September 14, 1979

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.

Date Surveyed July 24, 1979  
 Registered Professional Engineer and/or Land Surveyor  
Fred B. Kerr Jr.  
 Certificate No. 3950

N.M.C.C.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

30-045-2

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  
 720 So. Colorado Blvd., Denver, Colorado 80222

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)  
 At surface  
 900' FNL, 900' FWL'  
 At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*  
 See Point 1B, Surface Use Plan

10. 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

17. NO. OF ACRES ASSIGNED TO THIS WELL

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

19. PROPOSED DEPTH  
 6,438

20. ROTARY OR CABLE TOOLS  
 Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)  
 6,272 G.L.

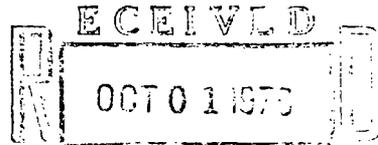
22. APPROX. DATE WORK  
 October 15,

23. PROPOSED CASING AND CEMENTING PROGRAM

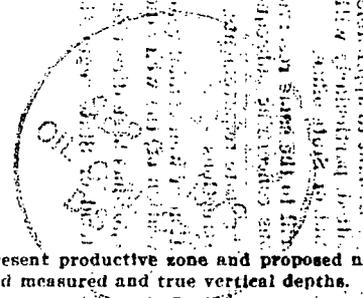
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4"	8-5/8"	24#	500'	Suff. cement to circ.
7-7/8"	5-1/2"	15.5#, 17.0#	6,438	See 4 below

SEE ATTACHED

*gas is dehydrated*



OIL CONSERVATION DIVISION  
SANTA FE



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

24. SIGNED \_\_\_\_\_ Division Production Manager DATE Sep 14

(This space for Federal or State office use)

PERMIT NO. \_\_\_\_\_ APPROVAL DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

*ok Frank*

\*See Instructions On Reverse Side

NMOCC

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

Form C-102  
Revised 10-1-78

All distances must be from the outer boundaries of the Section.

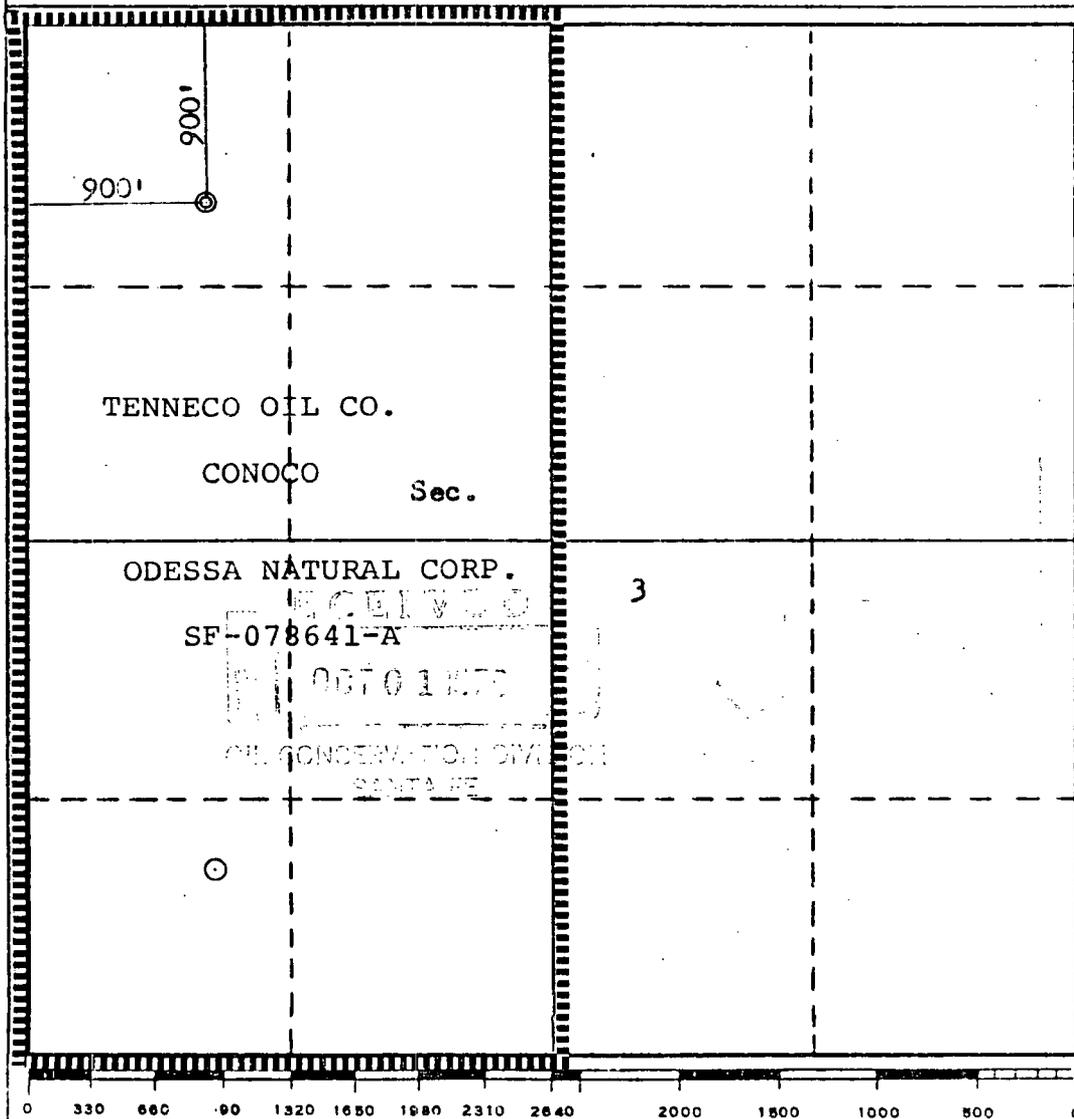
Operator <b>TENNECO OIL COMPANY</b>		Lease <b>DELHI-TAYLOR <del>11W</del> D.</b>		Well No. <b>1-E</b>
Unit Letter <b>D</b>	Section <b>3</b>	Township <b>26N</b>	Range <b>11W</b>	County <b>San Juan</b>
Actual Footage Location of Well: <b>900</b> feet from the <b>North</b> line and <b>900</b> feet from the <b>West</b> line				
Ground Level Elev. <b>6272</b>	Producing Formation <b>Dakota</b>	Pool <b>Basin Dakota</b>	Dedicated Acreage: <b>320.01</b> Acres	

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

Yes  No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been 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.

Name: J. A. Rusk

Position: Environmental Coordinator

Company: Tenneco Oil Company

Date: September 14, 1979

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.

Date Surveyed: July 24, 1979

Registered Professional Engineer and/or Land Surveyor:  
Fred B. Kerr, JR.

Certificate No. 3950