

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' FNL, 2095' FEL

14. PERMIT NO.
30-045-26568

15. ELEVATIONS (Show whether at top of well or at surface)
6843' GL

RECEIVED
OCT 30 1985
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

5. LEASE DESIGNATION AND SERIAL NO.
SF-077107

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Michener A

9. WELL NO.
7

10. FIELD AND POOL, OR WILDCAT
Otero CH/Blanco MV

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 33, T28N R9W

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 PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Progress Report

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.)*

10/10/85 MIRURT. Spud well @ 12 a.m. 10/11/85 w/fourcorners rig #8. Drill to csg pt. Survey: 127/ 3/4; 281/1.

10/11/85 Ran 9-5/8 csg, land shoe @301. Cmt w/250 sx cl B + 2% CaCl2 + 1/4#/sx celo (295CF), circ 22 bbls cmt to surf. WOC, NU csg hd & BOPS. Test to 1000# 15 min o.k. Drill out & ahead.

10/16/85 Strap out for logs, o.k. Ran GR-SP-DLL fr 4414 to 307, ran GR-CNL-CDL-CAL fr same interval.

10/17/85 Ran 108 jts (4414') 7" 23# K-55 STC csg landed 4425, DV @ 2208. Cmt 1st stage w/180 sx (331CF) 65:35:6 + 1/4#/sx celloflake + 2% CaCl2 & tail w/100 sx (118CF) CL-B + 1/4#/sx celloflake + 2% CaCl2. Lost full RETNS 1/2 way thru displacement. SD 5 min. Got full RETNS. Cmt 2nd stage w/320 sx (589CF) 65:35:6 + 1/4#/sx celloflake + 2% CaCl2. Tail w/50 sx (59CF) CL-B + same add. Lost full RETNS 1/2 way thru displ. PD @ 5 p.m. WOC, ran temp surv. TOC 300'. PT BOPE & drill out.

10/20/85 OA: Drill to 5700. C&C. Strap out of hole, MD 4' Corr. Logged, ran GR-DIL 5704-4425'. TIH, C&C. Prep to run csg. Ran GR-CDL-CAL fr 5704-4425.

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

SIGNED

TITLE Senior Regulatory Analyst

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

NOV 01 1985

OIL CON. DIV.

*See Instructions on Reverse Side

NMOCC

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

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

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10/21/85 Fin running csg. Cmt w/140 sx (258CF) 65:35:6 + 6% WL agent, tail w/100 sx (115CF) CL-B + 6% WL agent. Set pack off, circ out 10 bbl cmt. Rig rel @ 2 p.m.

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OIL CON. DIV.
DIST. 3

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

SIGNED

Scott McKinn

TITLE Senior Regulatory Analyst

DATE

10/28/85

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APPROVED BY

TITLE

DATE

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NMOC