

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATES
(Other instructions on re-
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

SF-077092B

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. ☐ 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
1580' FSL, 890' FEL

14. PERMIT NO.
30-045-25797

15. ELEVATIONS (Show whether SV, WT, GR, etc.)
5768'

16. PERMIT NO.
30-045-25797

17. ELEVATIONS (Show whether SV, WT, GR, etc.)
5768'

18. BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Houck Com

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde/
Basin Dakota

11. SEC., T., R., M., OR S.W. AND
SURVEY OR AREA

Sec. 1, T29N, R10W

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 ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

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

(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 perti-
nent to this work.)*

10/20/84: Landed short string @4626. NDBOP. NUWH. RDMOSU. Pmpd out plug on both sides.
Kicked MV around w/N₂. Flow to CU.

A Well Completion Report (Form 3160-4, formerly 9-330)
is required when this operation is completed.

RECEIVED

NOV 26 1984

OIL CON. DIV.
DIST. 3

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

SIGNED

Sgt M. E. Kury

TITLE Sr. Regulatory Analyst

DATE

10/25/84

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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.

OPERATOR

NM000