om 3160-5 November 1983) Formerly 9-331)

(Do n

UNITED STATES DEPARTMENT OF THE INTERIOR COther instructions on re-

BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE.

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

5.	LE	181	DES	IGN ATIO	N AND	SERIA	L NO.
	SI	F-0	178	194			
6.	IF	IND	AN,	ALLOTT	EE OR	TRIBE	NAME

	SUNDRY NOTICES	AND REPORTS	ON WELLS	
ot	use this form for proposals to Use "APPLICATION	drill or to deepen or plu FOR PERMIT—" for such	g back to a different reservoi proposals.)	F.

Use "APPLICATION FOR PERMIT—"	for such proposals.)	/	
OIL GAS X OTHER		7. UNIT AGREEMENT NA	NE.
2. NAME OF OPERATOR	RECEIVED	8. FARM OR LEASE NAM	E
Tenneco Oil Company	II E O E I V E D	Ludwick LS	
8. ADDRESS OF OPERATOR	00T 1 F 100F	9. WELL NO.	
P. O. Box 3249, Englewood, CO 80155	OCT 1 5 1985	5	
 LOCATION OF WELL (Report location clearly and in accordance See also space 17 below.) 		10. PIELD AND POOL, OF	WILDCAT
At surface	BUREAU OF LAND MANAGEMENT	Aztec Pictur	ed Cliffs
1500' FNL, 1600' FWL	FARMINGTON RESOURCE AREA	11. SEC., T., R., M., OR B SURVEY OR ARMA	
			N R10W
14. PERMIT NO. 15. ELEVATIONS (Show w	whether DF, RT, GR, etc.)	12. COUNTY OF PARISH	18. STATE
6144' GL		San Juan	NM

16.

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

NOT	CE OF INTENTION TO:	BUBBBQUBN	T REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING MULTIPLE COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT	REPAIRING WELL	
SHOOT OR ACIDIZE	ABANDON®	SECOTING OR ACIDIZING (Other) Production li	ABANDONMENT*	
(Other)		(Note: Report results of Completion or Recompletic	multiple completion on Well on 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 sones pertinent to this work.) *

10/2/85 MIRUSU. Blow dn well. No need to kill well. NDWH. NUBOP. Tally, PU & RIH w/2-3/8" 4.7#, EUE, 8rd tbg & 4-3/4" bit. Tagged fill @ 2570'.

10/3/85 Kill well, RIH & CO to TD 2624' w/foam. Drill to new TD of 2656 w/foam. Kill well & TOOH laying dn 2-3/8" tbg. Change BOP rams, RU & run 89 jts (2664.6') of 3-1/2" 9.2 J-55 Vam csg. Csg set @ 2652' w/Omega latch insert on btm. RU Dowell & cmt w/50 sxs (84 cu ft) RFC @ 2 BPM & 10 bbls chemical wash ahead. Release plug & displace w/1/2 bbl acetic acid & 23 bbls H2O. Total of 23.5 bbls. Press slowly climbed to 1000 psi. Did not bump plug. Release press & not flowback. RD Dowell & wait 1 hr., set slips. Slacked off 15,000 #'s on csg. Cut off csg. NU tbg head.

10/4/85 RUN temp survey. TOC @ 1700'. Run GR-Neutron log from PBTD to 1400'. csg to 2500 psi. Csg did not hold. Leak in 3-1/2" x 4-1/2" nipple in the head. Re-weld nipple. PT csg to 2500 psi. Held o.k. PU 1-1/4" tbg & tally in hole. Tag PBTD @ 2649'. Roll hole w/2% KCl.

10/5/85 Spot 200 gal 7-1/2% DI HCl across perfs. P00H w/1-1/4" tbg. Perforate (2586-2618) w/2-1/8" tornado magnum 2 JSPF 180 degree phasing. Total: 32', 64 holes. Est rate 3 BPM @ 1150 psi. ISIP= 0 psi. Acidized w/650 gal 15% weighted HCl & 96 ball sealers. AIR: 7 BPM @ 435 psi. No ball action. Run junk basket. Basket stuck

0 2594 Pull JB free. Frac dn	csg W//U U foam 2U# gel as follows:	
18. I hereby certify that the foregoing is true and correc	.	
SIGNED WILL THE STATE OF THE ST	TITLE Senior Regulatory Analyst DATE 10/15/85	•
	ACCEPTED FOR DECORD	
(This space for Federal or State office use)		
APPROVED BY	TITLE OCT PATE ORT	
CONDITIONS OF APPROVAL, IF ANY:	OCT 12 1985	

NMOCC FAKMINGTON RESOURCE AKEA Snm iee Indisuctions on Rev DIST. 3

5rm 3160-5 November 1983) Formerly 9-331)

UNITED STATES DEPARTMENT OF THE INTERIOR (Other instructions on re-

BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE.

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

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SF-078194

SUNDRY N	OTICES AND	REPORTS	ON WELLS	
not use this form for p	roposals to drill or	to deepen or plug	back to a different	reservoir.

Use "APPLICA	ats to drill or to deepen or plug back to a different reservoir. ATION FOR PERMIT—" for such proposals.)	1
OIL GAB X OTHER	·	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR		8. FARM OR LEASE NAME
Tenneco Oil Company		Ludwick LS
	ood, CO 80155	9. WELL NO.
 LOCATION OF WELL (Report location of See also space 17 below.) At surface 	early and in accordance with any State Countries 1985	10. FIELD AND FOOL, OR WILDCAT Aztec Pictured Cliffs
1500' FNL, 1600' FWL	BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA	11. SBC., T., E., M., OR BLK. AND SURVEY OR AREA
4. PERMIT NO.	15. ELEVATIONS (Show whether DF, BT, GR, etc.)	Sec. 31, T30N R10W
	6144' GL	San Juan NM
	propriate Box To Indicate Nature of Notice, Report, or (Other Data

NOT	ICE OI	FINTENTION TO:	SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF FRACTURE TREAT		PULL OR ALTER CASING MULTIPLE COMPLETE	 WATER SHUT-OFF REPAIRING WELL FRACTURE TREATMENT ALTERING CARING	
BHOOT OR ACIDIZE		ABANDON®	BHOOTING OR ACIDIZING ABANDONMENT*	
(Other)	L	CHANGE PLANS	 (Other) Production to liner (Nors: 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.)

10/5/85 continued 50,000 gal foam & 84,000# 20/40.

AIR: 25 BPM @ 1650 psi

ISIP: 1050 psi, 15': 940 psi.

10/7/85 Kill well w/2% KCl wtr. TIH w/1-1/4" 2.4# J-55 EUE 10rd tbg w/1.06 S/N & aluminum pmp out plug, 1 jt off btm. Tagged fill @ 2615' (34' of fill). CO to PBTD w/foam. Kill well. PU & land tbg @ 2601'. NDBOP. NUWH.

OIL CON. DIV

		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 uses		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE

*See Instructions on Reverse Side

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECE	IVED	
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
	OIL	
TRANSPORTER	GAS	
OPERATOR		
PRORATION OFFICE		

OIL CONSERVATION DIVISION P.O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

LAND OFFICE											
TRANSPORTER	GAS			REQL	JEST FO	R ALLOWA	ABLE				
OPERATOR	<u> </u>					ND			A.		
PRORATION OFFICE		ΑU	THORIZ	ZATION TO			AND NATU	RAL GAS	M ra		
1.						-	•			ρ 👝	
Operator		· · · · · ·							'U ~ (DE TIN	2.
Tenneco Oil	Company	E	0								'S 🦰
Address									SEP		4 //)
P. O. Box 32		lewood, CC	80.	155				C	1/4 00	06 1985 V. DIV.	
Reason(s) for filing (Chec	ck proper box)					[Other (Please e	xplain)		V ~	
New Well	Chan	ige in Transporter (of:						UIST	: U/V	,
Recompletion	\sqcup	Oil		Dry G	ias		11-11 11		••	3	'
Change in Ownershi	ip 📙	Casinghead Gas		Cond	ensate		Well N	але			
If change of ownership given and address of previous of		El Paso	Natui	ral Gas	, P.O.	Box 499	00, Farm	ington,	NM 8749	9	
II. DESCRIPTION C	OF WELL A	ND LEASE									
Lease Name		We	II No.	Pool Name, Inc	_	ation		Kind of Lease State, Federal		SA	Lease No.
Ludwick LS			5	Aztec-F	PC			State, rederal		SF	078194
	F	1500			N			1600		W	
Unit Letter	<u> </u>			Feet From The			_ Line and		Feet Fro		
	31			3ON			10W		San	Juan	
Line of Section		Townshi	ip			Range		, <u>1</u>	NMPM, SATI		County
W DEGICALATION	OF TD 4 NO	DODTED OF	O	D MATUD							
III. DESIGNATION Name of Authorized Trans	OF IRANSI	or Condensate X	JIL AN	DNATURA	AL GAS	Address (Give	e address to whi	ich approved copy	of this form is	to he senti	
Conoco Inc.	•	• •	ation	n		ì		O, Hobbs			j
Name of Authorized Trans		-		······································		1		ich approved copy	•		
El Paso Natu	•	lead das E of D,	, 000 4			1		90, Farm			0
LI TASO MACA	101 003	TUnit	Sec.	Twp.	Rge.		ly connected?		Vhen	181 0743	-
If well produces oil or liqui	ilds,	F	31	30N	10W	is gas actual	Yes	'	*IICII		
give location of tanks.			1 2 1	3014	TOM		162	i			
If this production is commir	ngled with that fro	om any other lease o	or pool, giv	e commingling	order numbe	r					
NOTE: Complete F	Parts IV and	V on reverse	side if	necessary	<i>.</i> .						
VI. CERTIFICATE O	OF COMPLI	ANCE					(OIL CONSE	RVATION E	NOISION_	D 0 0 400=
I hereby certify that the rul	-					11	ED		$\sim \downarrow \downarrow$	SE	<u>P,0₉6_1985</u>
with and that the informat	tion given is true	and complete to t	he best of	f my knowledge	and belief.	11	5	. / / (
						BY		anger.	- Xave		
	- 1	<i>,</i> '				TITLE			0	SUPERV	ISOR DISTRICT 第 3
1.4	m- U					11166					
xur	117m	Windham!				13		compliance with			
Sr. Regulator	v Analus	(Signature)				13			•	•	s form must be accom- e with RULE 111.
- Regulator						11 '					and recompleted walls.
	OE1	(Title)	•			11					number, or transporter,
	SEF)				ch change of co		g, , , , , , , , , , , , , , , , , ,		
		(Date)				Separate	Forms C-104 m	ust be filed for ea	ach pool in mul	tiply completed v	wells.

Form C-104 Revised 10-01-78 Format 06-01-83

IV. COMPLETION DATA

Testing Method (pilot, back pr.)	Tubing Pressaure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Actual Prod. Test - MCF/D	tength of Test	Bbls. Condensate/MMCF	Gravity of Condensate
GAS WELL			
Actual Prod. During Test	.eld8 - liO	Water - Bbls.	Gas - MCF
Length of Test	Tubing Pressure	Casing Pressure	Суроке Size
19-210 411			7-10-11-10
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
V. TEST DATA AND REQUEST R	ALLOWABLE OIL WELL	depth or be for full 24 hours)	
		o beol to amuloy istat to vievoset safte ad lisa to	i and must be equal to or exceed top allowable for this
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	TUBING, CASING, A	СЕМЕИТІИВ ВЕСОВД	
Pertorations			Depth Casing Shoe
Elevations (DF, RKB, RT, GR, etc.)	Mame of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Date Spudded	Date Compl. Ready to Prod.	Total Depth	.0.T.8.9
Designate Type of Completion	(X)	Men Well Workover Deepen	Plug Back Same Res'v Diff. Res'v
IV. COMPLETION DATA		-1	

Submit 5 Copies St Appropriate District Office Energy, Minerals DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

DISTRICT II P.O. Drawer DD, Antesia, NM 88210			30x 2088 Mexico 87504-2088				
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 874	lo DEOLIEST			7471041			
I.			BLE AND AUTHORI IL AND NATURAL GA	AS			
Operator Amoco Production Con	mpany	į.	Well API No.				
Address 1670 Broadway, P. O.		nver. Colora	do 80201	30045090	J29		
Reason(s) for Filing (Check proper box		iver, corora	Other (Please expla	sin)			
New Well	-	e in Transporter of:					
Recompletion Cliange in Operator	Oil Casinohead Gas	Dry Gas Condensate					
to account to the state of the			tizzza P. a				
		d 1, 0102 3.	Willow, Englewoo	d, Colorado	<u> 80155</u>		
II. DESCRIPTION OF WELL Lease Name	L AND LEASE Well N	No. Pool Name, Includ	tion E-mation				
LUDWICK LS	5		TURED CLIFFS)	FEDERAL	Lease No. SF078194		
Location F	. 1500	Feet From The FA					
Unit Letter F Section 3 1 Town	ship30N				m The FWL Line		
Jown Jown	ampoo.,	Rangel OW	, NMPM,	SAN JUAN	County		
III. DESIGNATION OF TRA							
Name of Authorized Transporter of Oil		densate [AT]	Address (Give address to wh				
Name of Authorized Transporter of Cas EL PASO NATURAL GAS C	_	or Dry Gas X	Address (Give address to wh				
If well produces oil or liquids,	Unit Sec.	Twp. Rge.	P. O. BOX 1492, I	When 7	79978		
give location of tanks.	ii	. I <u> </u>					
If this production is commingled with th IV. COMPLETION DATA	at from any other lease	or pool, give comming	ling order number:				
Designate Type of Completio	Oil W	ell Gas Well	New Well Workover	Deepen Plug	Back Same Res'v Diff Res'v		
Date Spudded	Date Compl. Ready	v to Prod.	Total Depth				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		P.B.T.D.		
	rane or Froducing	, i ominadoji	(op one one cay	lubir	ng Depth		
Perforations			1	Dept	h Casing Shoe		
	TUBIN	G, CASING AND	CEMENTING RECORD	!)			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
	-						
V. TEST DATA AND REQÜÎ OIL WELL — (Test must be after			to a to a				
Date First New Oil Run To Tank	Date of Test	ne oj toda on ana must	be equal to or exceed top allow Producing Method (Flow, pun		or be for full 24 hours.)		
Length of Test	Tubing Pressure		Casing Pressure	Chok	e Size		
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.	Gas- I	MCF		
CAO TUDE			l				
GAS WELL Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF	Gravi	ity of Condensate		
esting Method (pitos, back pr.)	Tubing Pressure (SI	nut-in)	Casing Pressure (Shut-in)		e Size		
VI. OPERATOR CERTIFIC I hereby certify that the rules and region Division have been complied with and	ulations of the Oil Cons	ervation	OIL CON	SERVATIO	ON DIVISION		
is true and complete to the best of my		ITEM MOUTE	Date Approved	MAY	0 8 1989		
Simplifie J. Ham	pton		By	دسدة	Sheet		
J. L. Hampton S	r. Staff Adm	Title	11	UPERVISION	DISTRICT #3		
Janaury 16, 1989	a transfer a commercial commercial and an experience of the commercial and the commercial	-830-5025 Elephone No.	TRIO				

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

- 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

State of New Mexico Energy, Minerals and Natural Resources Department

Furm C-104 Revised 1-1-89 See Instructions -1-

P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210				P.O. Bo	TION D ox 2088 exico 8750		N			•	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		JEST F	OR AL	LOWAE	BLE AND A	UTHORI					
l. Operator		TO THA	INSPC	HIUIL	AND NAT	UNALG	Mell A	Pi No.			
AMOCO PRODUCTION COMPA	MY						30	0450902	9		
Address											
P.O. BOX 800, DENVER,	COLORAL	00 8020)1		F1 00	- (01					
Reason(s) for Filing (Check proper bax) New Well		Change in	Transnor	ter of:	L.J Oute	t (Please expl	uw,				
Recompletion	Oil		Dry Gas								
Change in Operator	Casinghe	ad Gas 🔲	Condens	ale []							
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	AND LE	ASE									
Lease Name	11,15	Well No.	Pool Na	me, lacludi	luding Formation			Kind of Lease		Lease No.	
LUDWICK LS		5	AZ	EC (P	ICT CLIF	S)	FE	DERAL	SFC	78194	
Location F		1500			FNI.		1600 -		FWL	Line	
Unit Letter	_ :	1300	_ Feet Fro	m The	FNL Line	and	1000 Fe	st From The		Line	
Section 31 Townsh	ip3	ON	Range	101	√ ,NN	APM,	SA	N JUAN		County	
III. DESIGNATION OF TRAF	JCDADTE	P OF O	TI ANI	NATII	DAL GAS						
Name of Authorized Transporter of Oil	19LOKII	or Conde	DEME	711110	Address (Gin	address to w	hich approved	copy of this fo	em is to be se	nt)	
MERIDIAN OIL INC.	L									M 87401	
Name of Authorized Transporter of Casin EL PASO NATURAL GAS (ighead Gas COMPANY		or Dry		P.O. I	30X 1492	hich approved	O, TX		ni)	
If well produces oil or liquids, give location of tanks.	Unit 	Soc.	Twp	Rge.	is gas actuali	connected?	When	7			
If this production is commingled with that	from any of	her lease or	rpool, giv	e comming	ling order numb	er:					
IV. COMPLETION DATA	(Y)	Oil Wel	1 0	ias Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded		npi. Ready i	io Prod.		Total Depth	L		P.B.T.D.	·		
	ļ										
Elevations (DF, RKB, RT, GR, etc.)	Name of	Producing I	ornation		Top Oil/Gas	Pay		Tubing Dep	th		
Perforations					L			Depth Cass	ig Shoe		
								<u> </u>			
					CEMEN'TI				SACKS CEM	FNT	
HOLE SIZE CASING & TUBING SIZE		DEPTH SET		GRONG GENERAL							
					 						
					1						
					J			J			
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR	ALLOW	ABLE	ادم د ادم	n he equal to a	exceed ton a	llowable for th	s depth or be	for full 24 hos	us.)	
OIL WELL (Test must be after Date First New Oil Rua To Tank	Date of		e oj 1000	ni ena mili	Producing M	ethod (Flow,	pump, gas lift,	elc.)			
Pere Ling saca Oli Von to 1907	Date Of 1				1553	COE	HWE				
	Tubing B				Casing Pros	us the lim	B 11 12	Chuke Size	;		

OIL METER (1811 Mari of alies see	Diery of 1882 House of 1882 to		
Date First New Oil Rua To Tank	Date of Test	Producing Method (Flow, pump, gas lift, et	. j
Length of Test	Tubing Pressure	Casing Presents (17 Lin 1) 1/ 1/2	Chake Size
Actual Prod. During Test	Oil - Bbls.	Water Bbls FEB2 5 1991.	Gas- MCF
		200 200 100 5 1100	·

OIL CON. USS. **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCR Length of Test Actual Prod Test - MCT/D Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) l'esting Method (pitot, back pr.)

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 Supervisor Title Printed Name February 8, 1991 303-830-4280 Telephone No. Date

OIL CONSERVATION DIVISION

FEB 2 5 1991 Date Approved By.

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.

Title.

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) Scparate Form C-104 must be filed for each pool in multiply completed wells.