

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Tenneco Oil Company E & P WRMD	8. FARM OR LEASE NAME Jane Mansfield
3. ADDRESS OF OPERATOR P. O. Box 3249, Englewood, CO 80155	9. WELL NO. 1A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 815' FNL, 850' FEL	10. FIELD AND POOL OR WILDCAT Blanco Mesa Verde/ Undes. Fruitland Coal
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, ST, GR, etc.) 6131' GR
	11. SEC., T., R., M., OR B.L.E. AND SURVEY OR AREA Sec. 19, T30N 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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>First Delivery Notice</u>	

(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.)*

The Fruitland Coal side of the referenced well was placed on production February 15, 1985. Nature of production is natural gas.

RECEIVED
FEB 19 1985
BUREAU OF LAND MANAGEMENT,
FARMINGTON RESOURCE AREA

Oil CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Sr. Regulatory Analyst DATE 2/18/85

(This space for Federal or State office use)
APPROVED BY _____ TITLE _____ DATE FEB 21 1985

CONDITIONS OF APPROVAL, IF ANY: _____
FARMINGTON RESOURCE AREA
BY [Signature]

*See Instructions on Reverse Side
~~ALBUQUERQUE COPY~~
OPERATOR
NMOC