

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. SF-0805000
2. NAME OF OPERATOR Texaco Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME /
3. ADDRESS OF OPERATOR P. O. Box EE Cortez, Co. 81321	7. UNIT AGREEMENT NAME /
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FSL 990' FWL	8. FARM OR LEASE NAME Anderson "A"
	9. WELL NO. #3
	10. FIELD AND POOL, OR WILDCAT S. Blanco Picture Cliffs
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25, T24N, R2W
14. PERMIT NO.	12. COUNTY OR PARISH Rio Arriba
15. ELEVATIONS (Show whether DF, AT, OR, etc.) 7398' DF	13. STATE New Mexico

RECEIVED

AUG 20 1986

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) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(Other) Request Extended SI Status

(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.) *

Texaco Inc. requests your approval for an extended shut-in status on the Anderson "A" well #3. The well is capable of producing gas in paying quantities, however the purchaser has requested the well be shut-in indefinitely due to lack of market demand. In addition the purchaser is subjecting our well to high line pressure in order to restrict their take of gas, thereby requiring Texaco to use compression equipment to obtain monthly lease production. The integrity of the casing is believed to be good. Last Bradenhead test submitted 8/83 indicated no flow. The Anderson "A" lease is comprised of three wells and all three are shut-in.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

This Approval or Temporary
Abandonment Expires Aug 21 1986

AUG 28 1986
OIL CON. DIV.
DIST. 3

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

SIGNED M. S. Vetter / B. R. May TITLE Area Superintendent DATE 8/14/86

(This space for Federal or State office use)

APPROVED BY BLM (4) NMOGCC (2) TITLE JNH LAA ARM DATE AUG 28 1986

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOGCC

AREA MANAGER