

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.)

RECEIVED

1. OIL ☐ GAS ☒ OTHER ☐

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 3249, Englewood, CO 80155

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1550' FWL, 1650' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5800' GL

5. LEASE DESIGNATION AND SERIAL NO.

NM-012202

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bolack B LS

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 33, T28N R8W

12. COUNTY OR PARISH 13. STATE

San Juan

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) Sidetrack

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.) *

10/18/85 MIRUSU. NDWH NUBOP. Tally pick up and RIH w/2-3/8" tbgs, 4-1/2" csg scraper 3-7/8" bit. Tag the cmt at 4689'. Drill to PBD 4733'. PT csg to 3500 psi. Held o.k. Circulated the hole w/1% KCL wtr. Spot 500 gal of 7-1/2% double inhibited HCL at 4697'.

10/19/85 RIH w/GR/CCL. RIH w/3-1/8" csg gun under a lubricator. Perf the Pt. Lookout in the Mesaverde. 2 JSPF 4372-4400', 4440-46', 4450-52', 4466-70', 4472-74', 4492-95', 4501'-05', 4518-23, 4531-34', 4541-48', 4694-97', 67', 134 holes. Esta'b rate at 50 BPM. 2900 psi ISIP = 0. Acidized and balled off w/1500 gal 15% weighted HCL 201 1.1 S.G. Ball sealers. Acid away at 20 BPM 1600 psi. Ball action excellent. Ball off complete. Frac well dn csg w/133,500 gal 1% KCL slick wtr., 167,500# of 20/40 sd. Well treated at 102 BPM, 2850 psi. ISIP = 200. Rigged up and RIH w/wireline set 4-1/2" Baker retrievable bridge plug. Set the plug at 4320'. Dumped 2 sx of sd on top. Load the hole w/1% KCL. PT the bridge plug and csg to 3500 psi. Held o.k. RIH w/tbg 4247'.

10/21/85 Spot 300 gal of 7-1/2% double inhibited HCL at 4274'. Come out of hole w/tbg. RIH w/3-1/8" csg gun. Perforate the Menefee w/2 JSPF: 4024-26', 4030-49', 4067-71', 4085-4101', 4107-20', 4238-44', 4252-60', 4264-70', Total of 74' 148 holes. Acidize and ball off w/2000 gal 15% weighted HCL 221 1.1 G. G. ball sealers. Acid away at 35 BPM at 2000 psi. Frac the well w/122,000 gal of 1% KCL slick wtr, 139,000# of sd. Well treated at 85 BPM 2800 psi. RIH RIH 4-1/2" retrievable bridge plug. Set the plug at 3955'. Dump 2 sx of sand top of the bridge plug. PT 3500 psi. Held o.k. RIH w/tbg. Spot 200 gal

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

SIGNED

Scott McKinn

TITLE Senior Regulatory Analyst

DATE

10/28/85

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

NOV 06 1985

OIL CON. DIST. 3

*See Instructions on Reverse Side

NMOCC

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.

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 NM-012202	
2. NAME OF OPERATOR Tenneco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 3249, Englewood, CO 80155		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 1550' FWL, 1650' FEL		8. FARM OR LEASE NAME Bolack B LS	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5800' GL		10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T28N R8W	
		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) Sidetrack <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.) *

10/21/85 Continued 7-1/2% double inhibited HCL at 3390'. RIH w/3-1/8" csg gun. Perforated the Cliffhouse 2 JSPF - @ 3779-90', 3827-35', 3870-89, 38', 76 holes. Acidize and ball off w/1000 gal of 15% weighted HCL 114 1.1 S.G. Ball sealers. Frac the Cliffhouse w/81,000 gal of 1% KCL slick wtr, 95,000# 20/40 sd. Well treated at 60 BPM at 2850. Closed the rams as soon as possible.

10/22/85 RIH w/tbg and retrieving head. Tag sand fill at 4140'. CO to the top of the retrievable bridge plug at 4320' w/foam. Released plug, POOH and LD. RIH w/tbg and SN. Tag sand fill at 4355'. CO to PBTD w/foam. Well and land at 4558'. NDBOP NUWH. RDMOSU.

RECEIVED
NOV 06 1985
OIL CON. DIV.
DIST. 3

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

SIGNED <u>Scott McKinnis</u>	TITLE <u>Senior Regulatory Analyst</u>	DATE <u>10/28/85</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

ACCEPTED FOR RECORD

NOV 05 1985

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY Smn

NMOCC

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.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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

Form C-104
Revised 10-31-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
SEP 06 1985
OIL CON. DIV.
DIST. 3

Operator Tenneco Oil Company E & P WIND	
Address P. O. Box 3249, Englewood, CO 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Condensate
Well Name	

If change of ownership give name and address of previous owner El Paso Natural Gas, P.O. Box 4990, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bolack B LS	Well No. 1	Pool Name, Including Formation Blanco-MV	Kind of Lease State, Federal or Fee USA NM	Lease No. 012202
Location				
Unit Letter G : 1550 Feet From The N Line and 1650 Feet From The E				
Line of Section 33 Township 28N Range 8W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

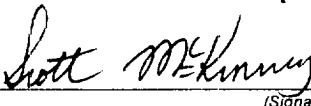
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Conoco Inc. Surface Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 460, Hobbs, NM 88240			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4990, Farmington, NM 87499			
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 33	Twp. 28N	Range 8W
Is gas actually connected?		When		
Yes				

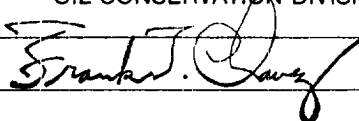
If this production is commingling with that from any other lease or pool, give commingling order number

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.


(Signature)
Sr. Regulatory Analyst
(Title)
SEP 1 1985
(Date)

OIL CONSERVATION DIVISION	
APPROVED	SEP 06 1985
BY	
TITLE	SUPERVISOR DISTRICT # 2

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion — (X)				Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'y.	Diff. Res'y.
Date Spudded		Date Compl. Ready to Prod.		Total Depth		P.B.T.D.					
Elevations (D.F., RKB, RT, GR, etc.)		Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth		Depth Casing Shoe			
Perforations											
TUBING, CASING, AND CEMENTING RECORD											
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
Length of Test		Tubing Pressure		Casing Pressure	
Actual Prod. During Test		Oil - Bbls		Water - Bbls	
				Gas - MCF	

GAS WELL

Actual Prod. Test - MCF/D		Length of Test		Bbls. Condensate/MMCF	
Testing Method (pilot, back pr.)		Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)	
				Choke Size	
				Gravity of Condensate	