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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name Riddle Gas Unit A	
9. Well No. 1M	
10. Field and Pool, or Wildcat Basin Dakota/Blanco M	
12. County San Juan	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

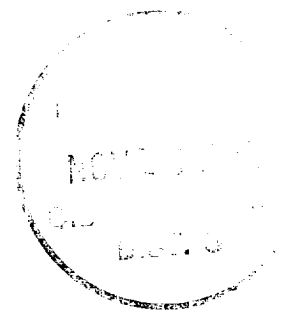
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Tenneco Oil Company
3. Address of Operator Box 3249, Englewood, CO 80155
4. Location of Well UNIT LETTER I 1590 FEET FROM THE South LINE AND 570 FEET FROM THE East LINE, SECTION 9 TOWNSHIP 27N RANGE 9W NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Name change <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
		OTHER <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Tenneco respectfully requests permission to change the well name of the Riddle Gas Unit A1M, as referenced above, to the Riddle Com A1M. The original name was incorrect, as a communitization agreement is required for this well.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Denise Wilson TITLE Production Analyst DATE November 9, 1982

APPROVED BY Supervisor TITLE SUPERVISOR DISTRICT # 3 DATE NOV 12 1982

CONDITIONS OF APPROVAL, IF ANY: