

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SF-078195

6. INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Sellers LS

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Aztec Pictured Cliffs

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

Sec 32, T30N, R10W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other \_\_\_\_\_

b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☒ DEEP-EN ☐ PLUG BACK ☐ DIFF. REVR ☐ Other Liner Job

2. NAME OF OPERATOR  
Tenneco Oil Company

3. ADDRESS OF OPERATOR  
P.O. Box 3249, Englewood, Colorado 80155

4. LOCATION OF WELL (Report location clearly and in accordance with BLM Form 3160-4)  
At surface 990' FNL, 790' FEL

At top prod. interval reported below

At total depth

14. BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

15. DATE SPUDDED 9-14-51 16. DATE T.D. REACHED 9-22-51 17. DATE COMPL. (Ready to prod.) 2-9-86 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 6156' DF 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 2725' KB 21. PLUG BACK T.D., MD & TVD 2725' KB 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 2631 - 2655' KB Pictured Cliffs 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN GR/CCL 27. WAS WELL CORED No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	AMOUNT PULLED
9 5/8"	40#	106' KB	12 1/4"	75 SX
5 1/2"	14#	2575' KB	7 7/8"	150 SX
3 1/2"	9.2#	2725' KB	4 3/4"	100 SX

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1 1/4"	2634' KB	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2 JSPF, 24' 48 holes		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2631 - 2655' KB		2631-2655' KB	Acidized w/ 1500 gals 15% wgt'd hcl foam frac w/ 80,000 gals 70 Q foam w/ 2% KCl.

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
		Flowing				Producing	
DATE OF TEST	HOURS TESTED	CHOKES SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
2-9-86	3 hrs	3/4"	→		246		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
38	180	→		1973			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED [Signature] TITLE Sr. Regulatory Analyst DATE JUL 15 1986

\*(See Instructions and Spaces for Additional Data on Reverse Side)

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo Kirkland Fruitland Pictured Cliffs	1300 1386 2314 2594	1386 2314 2594 2690	Sandstone, Fresh water Shale Sandstone, Shale, & Coal Shale & Gas			

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator <b>Amoco Production Company</b>		Well API No. <b>3004509161</b>
Address <b>1670 Broadway, P. O. Box 800, Denver, Colorado 80201</b>		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator <b>Tenneco Oil E &amp; P, 6162 S. Willow, Englewood, Colorado 80155</b>		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>SELLERS 1S</b>	Well No. <b>4</b>	Pool Name, Including Formation <b>AZTEC (PICTURED CLIFFS)</b>	Lease No. <b>FEDERAL SF078195</b>
Location Unit Letter <b>A</b> <b>1750990</b> Feet From The <b>PSL FNL</b> Line and <b>1090 790</b> Feet From The <b>EWL FEL</b> Line Section <b>30</b> Township <b>30N</b> Range <b>10W</b> , NMPM, <b>SAN JUAN</b> 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"/>	Address (Give address to which approved copy of this form is to be sent)		
<b>CS1</b>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
<b>EL PASO NATURAL GAS COMPANY</b>	<b>P. O. BOX 1492, EL PASO, TX 79978</b>		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Rge.
Is gas actually connected?		When?	

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

### IV. COMPLETION DATA

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

### V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

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

### GAS WELL

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

### 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.

*J. L. Hampton*  
Signature  
**J. L. Hampton** Sr. Staff Admin. Suprv.  
Printed Name  
**Janaury 16, 1989** **303-830-5025**  
Date Telephone No.

### OIL CONSERVATION DIVISION

Date Approved **MAY 08 1989**

By *[Signature]*

**SUPERVISION DISTRICT # 3**

Title

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.
- 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.