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Form 3100-5  
December 1988

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

MAY 7 1990

FORM APPROVED  
Budget Bureau No. 1004-1135  
Expires September 30 1990

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. Lease Designation and Serial No.

SF-078116

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well:

Oil Well  Gas Well  Other

2. Name of Operator

Amoco Production Company Attn: John Hampton

3. Address and Telephone No.

P.O. Box 800, Denver, Colorado 80201

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

990' FNL, 990' FEL Sec. 20, T30N-R9W

8. Well Name and No.

Florance 2

9. API Well No.

30 045 09372

10. Field and Pool, or Exploratory Area

Blanco mesaverde/ Basin

11. County or Parish, State

San Juan, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection

Dakota is Abandoned

Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form 1

13. 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.)

Temporary abandonment procedure of the Dakota formation on 6/27/80 fulfills the permanent abandonment requirements of the Bureau of Land Management per conversation on 5/2/90 between Wayne Townsend (BLM) and Bill McGillivray (APC).

Mesaverde is a producing formation and we plan to continue production.

If you have any questions please call Julie Acevedo at 303-830-6003

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MAY 14 1990

OIL CON. DIV.  
DIST. 3

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

Signed

*J Hampton*

Title Sr. Staff Admin. Supv.

Date 5/2/90

(This space for Federal or State office use)

MAY 07 1990

Approved by

Title

Date

Conditions of approval, if any:

FARMINGTON RESOURCE AREA

BY

*SM*

## GENERAL INSTRUCTIONS

This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special in-

structions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

## SPECIFIC INSTRUCTIONS

*Item 4*—If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

*Item 13*—Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive

zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

## NOTICE

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

**AUTHORITY:** 30 U.S.C. 181 et. seq., 351 et. seq., 25 U.S.C. et. seq.; 43 CFR 3160.

**PRINCIPAL PURPOSE** — The information is to be used to evaluate, when appropriate, approve applications, and report completion of secondary well operations, on a Federal or Indian lease.

### ROUTINE USES:

- (1) Evaluate the equipment and procedures used during the proposed or completed subsequent well operations.
- (2) Request and grant approval to perform those actions covered by 43 CFR 3162.3-2(2).
- (3) Analyze future applications to drill or modify operations in light of data obtained and methods used.
- (4)(5) Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

**EFFECT OF NOT PROVIDING INFORMATION** — Filing of this notice and report and disclosure of the information is mandatory once an oil or gas well is drilled.

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501, et. seq.) requires us to inform you that:

This information is being collected in order to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

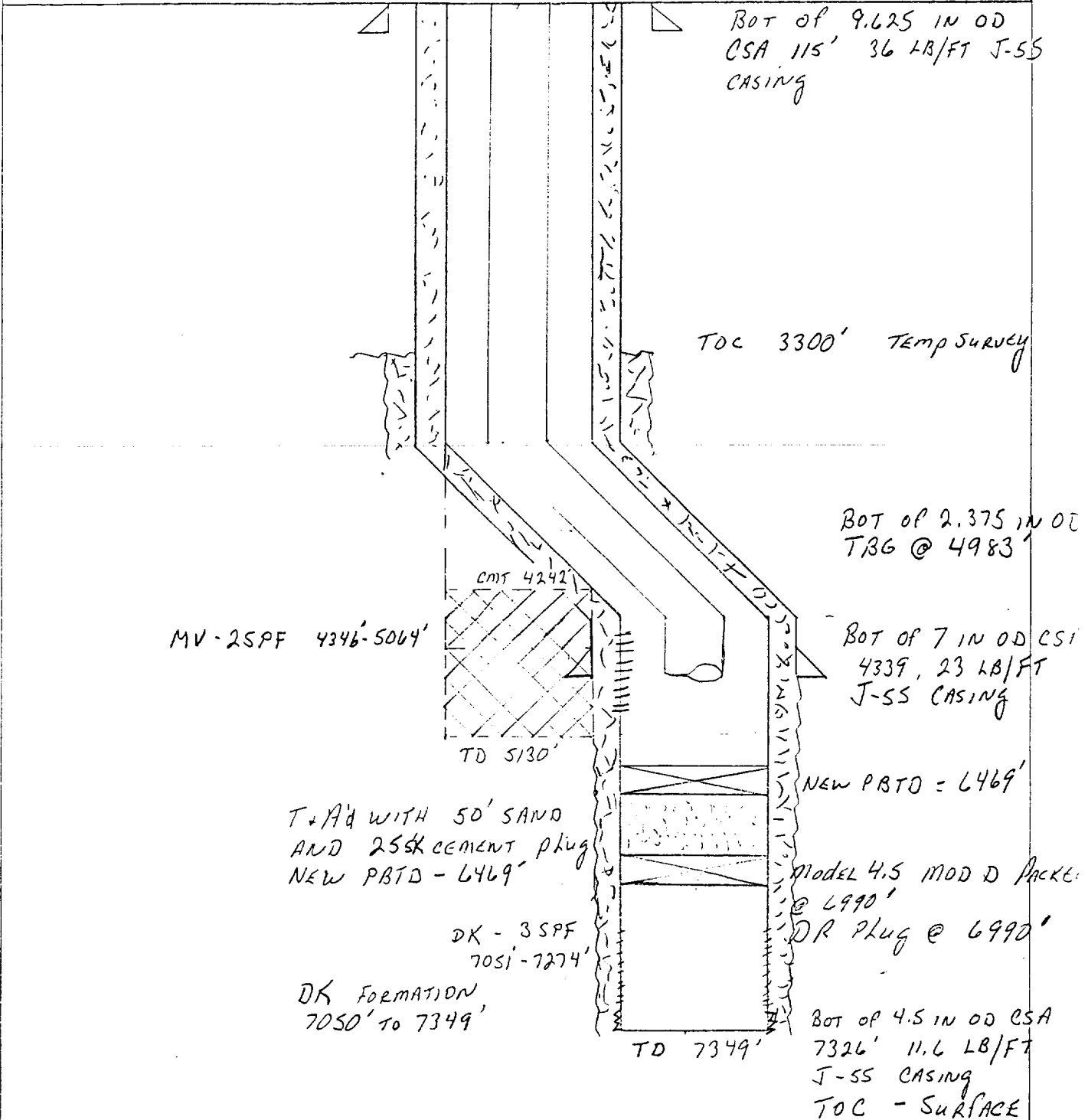
This information will be used to report subsequent operations once work is completed and when requested, to obtain approval for subsequent operations not previously authorized.

Response to this request is mandatory for the specific types of activities specified in 43 CFR Part 3160.

Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management, (Alternate) Bureau Clearance Officer, (WO-771), 18 and C Streets, N.W., Washington, D.C. 20240, and the Office of Management and Budget, Paperwork Reduction Project (1004-0135), Washington, D.C. 20503.

PxA PROCEDURES

FLORANCE 2  
LOCATION 20A-T30N-R9W  
Orig Comp 6-3-50



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
Tenneco Oil Company

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

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 990' FNL, 990' FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE  
SF-078116

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Florance

9. WELL NO.  
2

10. FIELD OR WILDCAT NAME  
Blanco Mesaverde/Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 20, T30N, R9W

12. COUNTY OR PARISH  
San Juan

13. STATE  
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5994'

REQUEST FOR APPROVAL TO:                      SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF                      

FRACTURE TREAT                              

SHOOT OR ACIDIZE                              

REPAIR WELL                                      

PULL OR ALTER CASING                              

MULTIPLE COMPLETE                              

CHANGE ZONES                                      

ABANDON\*    

(other) Temporarily abandon zone X

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)  
FEB 19 1982  
U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

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.)\*

6/25/80--MIRUSU. Kill well w/1% KCL wtr. NDWH. NUBOP.  
6/26/80--RIH w/tbg. Tagged sd fill 19' above pkr. Washed to top of pkr @ 6990'.  
6/27/80--Kill well w/1%. POOH w/rest of tbg, seal assembly, sliding sleeve, over-shot, collars & jars. RIH w/DR pkr plug. Seat in pkr @ 6990'. Spot 50' of sd. Let settle 45 min. Spotted 25 sx of neat cmt on top of sd. New BPTD 6469. Layed dn 64 jts of 2 3/8" J-55 EUE 8 round tbg. Landed tbg @ 4983' w/seating nipple 1 jt off bottom. NDBOP. NUWH. Shut well in. RDMSU.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

18. I hereby certify that the foregoing is true and correct  
SIGNED Louise J. Peron TITLE Production Analyst DATE 2/12/82

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

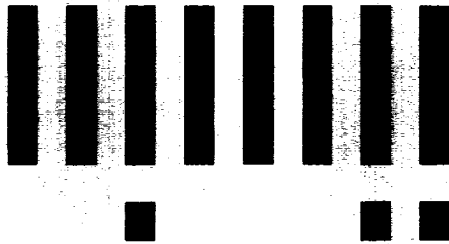
FEB 23 1982

FARMINGTON DISTRICT

BY [Signature]

\*See Instructions on Reverse Side

OPERATOR



**LTR**



**Job separation sheet**

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

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

I.

Operator <b>AMOCO PRODUCTION COMPANY</b>	Well API No. <b>300450937200</b>
Address <b>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"/> <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name and address of previous operator \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>FLORANCE</b>	Well No. <b>2</b>	Pool Name, including Formation <b>BLANCO MESAVERDE (PRORATED GAS)</b>	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter <b>A</b>	<b>990</b>	Feet From The <b>FNL</b>	Line and <b>990</b>	Feet From The <b>FEL</b>
Section <b>20</b>	Township <b>30N</b>	Range <b>9W</b>	<b>NMPM,</b>	County <b>SAN JUAN</b>

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>MERIDIAN OIL INC.</b>	<b>3535 EAST 30TH STREET, FARMINGTON, NM 87401</b>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>SUNTERRA GAS GATHERING CO.</b>	<b>P O BOX 1899, BLOOMFIELD, NM 87413</b>	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	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				
<b>TUBING, CASING AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACK CEMENT		

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OIL CON. DIV.  
DIST. 3

**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 the 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 (pilot, 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.

*D. W. Whaley*  
Signature  
**Doug W. Whaley, Staff Admin. Supervisor**  
Printed Name Title  
Date **July 5, 1990** Telephone No. **303-830-4280**

**OIL CONSERVATION DIVISION**

Date Approved **AUG 23 1990**  
By *[Signature]*  
Title **SUPERVISOR DISTRICT #3**

**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.