

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

5. LEASE DESIGNATION AND SERIAL NO.

SF-078201

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Florange

9. WELL NO.

20

10. FIELD AND POOL, OR WILDCAT

Mesaverde-Dakota Dual

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

Sec. 24, T30N R9W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

1. OIL ☐ GAS ☒ 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 and in accordance with any State requirements.*
See also space 17 below.)
At surface

990' FNL, 1650' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether in feet or meters)

5830 DF

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

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Other) commingle production

(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.)*

Tenneco requests permission to commingle the Mesaverde and Dakota Formation according to the attached detailed procedure. The New Mexico Oil Conservation Division has granted approval with administrative order #DHC-531. Verbally permission granted by Steve Mason, 7-1-85.

RECEIVED
JUL 15 1985
OIL CON. DIV.
DIST. 3

JUL 2 1985

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

SIGNED

TITLE Senior Regulatory Analyst

DATE July 2, 1985

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

JUL 1 1985

AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

NMOCC

0268z

LEASE Florance

WELL NO. 20

CASING:

10-3/4"OD, 32.75 LB, H-40 CSG. W/ 200 SX

TOC @ . HOLE SIZE 13-3/8 DATE: 2-14-54

REMARKS

7-5/8"OD, 26-4 LB, CSG. W/ 200 SX

TOC @ . HOLE SIZE 9-7/8 DATE: 3-3-54

REMARKS

4-1/2"OD, 11.6 LB J-55 CSG. W/ 400/275 SXS DATE: 6-10-65

TOC @ . HOLE SIZE 6-1/4

REMARKS Circ Cmt on 1st stq; lost circ on
2nd stage. DV @ 3789.

TUBING:

2-3/8"OD, 4.7 LB, GRADE, RD, CPLG

MOD "F" @ 6710

LANDED @ 6710. SN, PACKER, ETC. MOD "D" @ 6795

DETAILED PROCEDURE:

1. WIRU mast truck and wire line unit.
2. Lubricate in hole with thru-tbg perforating gun.
3. Perforate the 2-3/8" Tbg with 1 shot at the following depths:

4858

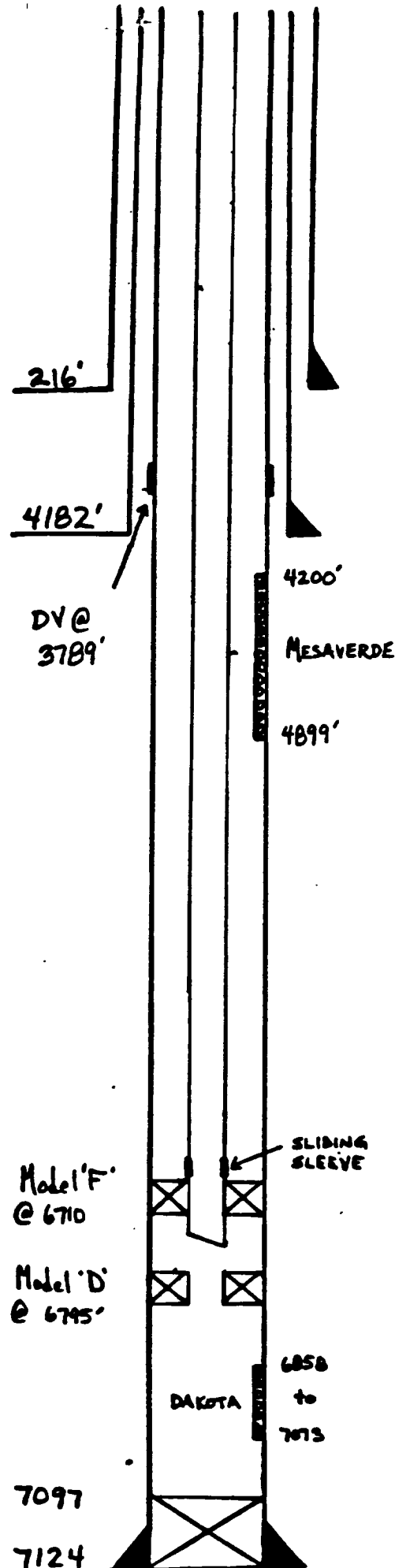
4860

4862

4864

4866

4. RDMOWL and mast truck.
5. Return well to production.



RECEIVED
JUL 8 - 1985
Purchasing Department
Western Rocky Mtn. Division

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-078201
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 990' FNL, 1650' FEL	8. FARM OR LEASE NAME Florance
14. PERMIT NO.	9. WELL NO. 20
	10. FIELD AND POOL, OR WILDCAT Basin DK/Blanco MV
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24, T30N, R9W
15. ELEVATIONS (Show whether OF, ST, GR, etc.) BUREAU OF LAND MANAGEMENT 5830' OF RESOURCE AREA	12. COUNTY OR PARISH San Juan
	13. STATE NM

RECEIVED
JUL 08 1985

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) Commingle <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.)*

7/2/85 MIRU mast truck. Lubricate in hole w/biwire gun & blast charges. Perf w/1 hole @ 4858', 4860', 4862', 4864', 4866' total of 5' holes. RDMO mast truck. Turned well onto production.

RECEIVED
JUL 15 1985
OIL CON. DIV.
DIST. 3

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

SIGNED [Signature] TITLE Senior Regulatory Analyst DATE July 5, 1985

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 11 1985

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

BY.....SM

*See Instructions on Reverse Side

NMOCC