

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"/>	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 930' FNL 1035' FEL	5. LEASE DESIGNATION AND SERIAL NO. SF-078336B	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. DASH OR LEASE NAME Barrett	9. WELL NO. 13	10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde	11. SEC., T., R., M., OR BLK. AND SUBDIV OR AREA Sec 30 T31N R9W	12. COUNTY OR PARISH San Juan	13. STATE NM
14. PERMIT NO.	15. ELEVATIONS (Show whether SP, RT, CR, etc.) 6298' GL											

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 PLANE <input type="checkbox"/>	(Other) <input type="checkbox"/>	Drilling <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion or 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.)*

08/20/88-- Drllg. MIRU, spud 11:30 8/19/88. Set & cmtd 8-5/8" csg @ 244, cmtd w/150sx (180ft³). Plug dn 5 p.m., circ cmt to sfs.
08/21/88-- Drl & svy.
08/22/88-- Prep to log.
08/23/88-- Ran DLL-SP-GR 3312'-244'; CDL-GR-CAL 3310-2310. Set & cmtd 4-1/2" csg @ 3294' in 2 stages. 1st stage: 175sx (210ft³). 2nd stage: 615sx (738ft³). Plug dn @ 1:20 a.m. 8/23/88, float held - good circ thruout, 2 bbls to sfs. FC @ 3249, DV @ 2584. Install tree, RD & rel rig.
08/24/88-- WO completion.

RECEIVED
SEP 06 1988
OIL CON. DIV
DIST. 3

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

SIGNED

TITLE Sr. Administrative Analyst

DATE 8/25/88

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNMOGIC

*See Instructions on Reverse Side