



NSL 5/20/98

Mid-Continent Region
Exploration/Production

Conoco Inc.
10 Desta Drive, Suite 100W
Midland, TX 79705-4500
(915) 686-5400

April 17, 1998

Mr. Michael Stogner
New Mexico Oil Conservation Division
2040 Pacheco
Santa Fe, New Mexico 87504



RE: Application for Unorthodox Coal Location
Delhi Taylor D #1E
API # 30-045-23796
Section 3, T-26-N, R-11-W, D
San Juan, New Mexico

Dear Mr. Stogner,

Conoco's Delhi Taylor D #1E is located in Section 3, T-26-N, R-11-W, 900 FNL & 900 FWL, San Juan County, New Mexico. In addition to standard 790' set back requirements, orthodox locations for 320 acres spaced Fruitland Coal requires that locations be situated in the NE/4 and/or SW/4 of any given section. The Delhi Taylor D #1E meets set back requirements but is situated in the NW/4 of Section 3; an orthodox location would be in the SW/4.

In order to prevent economic waste by allowing access to Basin Fruitland Coal reserves in an existing wellbore, Conoco respectfully requests that a NW/4, unorthodox location be approved for completion in the Basin Fruitland Coal Pool.

The offset operator plat shows that Larry F. Neely, Amoco, Merrion Oil & Gas, Burlington Resources, and Louis-Dreyfus are the offset operators that could be affected by this unorthodox location. Please find enclosed evidence that they have been notified of this application.

An unorthodox location order is requested based on the reasons given in the preceding paragraph. If there are further questions concerning this application please call me at (915) 686-5798.

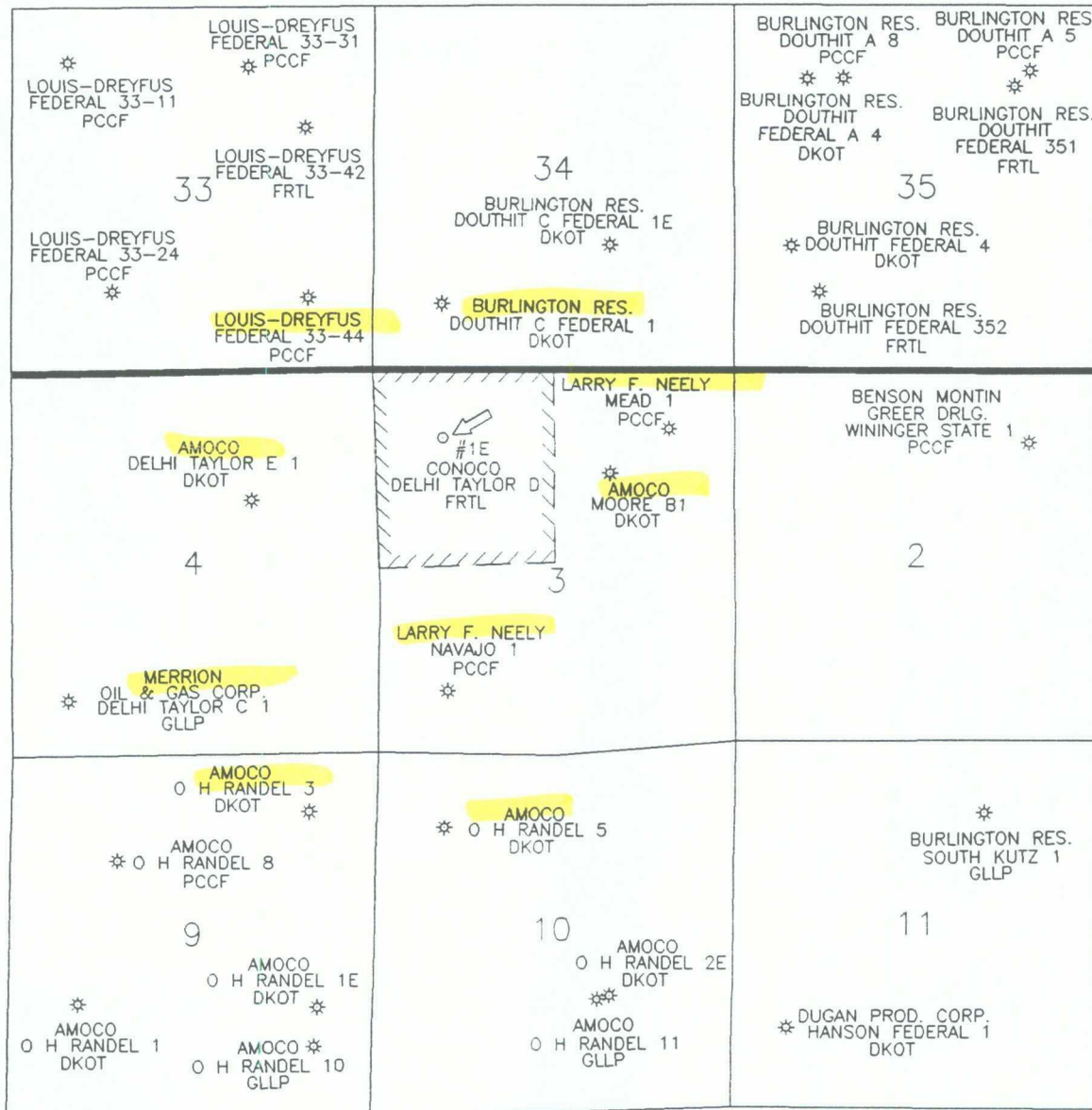
Sincerely,

Kay Maddox
Regulatory Agent

Km/

Cc: Oil Conservation Division - Aztec
Bureau Land Management-Farmington

R I I W



T
27
N

T
26
N

NOTES

NOTE:

DATE: 4/27/98

DRAWN BY: GLG

CHECKED BY:

APPROVED BY:

SCALE: 1" = 2640'

STATE PLANE COORDINATES REFERRED TO
NAD27 - N.M. WEST
STATE PLANE COORDINATES
ZONE - 3003



EPNGNA
MIDLAND DIVISION

CONOCO
DELHI TAYLOR D #1E
UNORTHODOX LOCATION APPLICATION
RIO ARriba COUNTY, NEW MEXICO

STATE	API COUNTY	WELL
30	\ 039	\ 237960

DRAWING
DTAY_D1E

CONOCO INC. OFFICE
10 DESTA DRIVE WEST
MIDLAND, TEXAS 79705

District I
PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

Revised February 21, 1994

instructions on back

District II
PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

Submit to Appropriate District Office

District III
1000 Rio Brazos Rd. Aztec, NM 87410

PO Box 2088
Santa Fe, NM 87504-2088

State Lease - 4 Copies

District IV
PO Box 2088, Santa Fe, NM 87504-2088

Fee Lease - 3 Copies

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-23796	2 Pool Code 71629	3 Pool Name Basin Fruitland Coal
4 Property Code 003039	5 Property Name Delhi Taylor D	6 Well Number #1E
7 OGRID No. 005073	8 Operator Name Conoco Inc., 10 Desta Drive, Ste. 100W, Midland, TX 79705-4500	9 Elevation 3404'

10 Surface Location

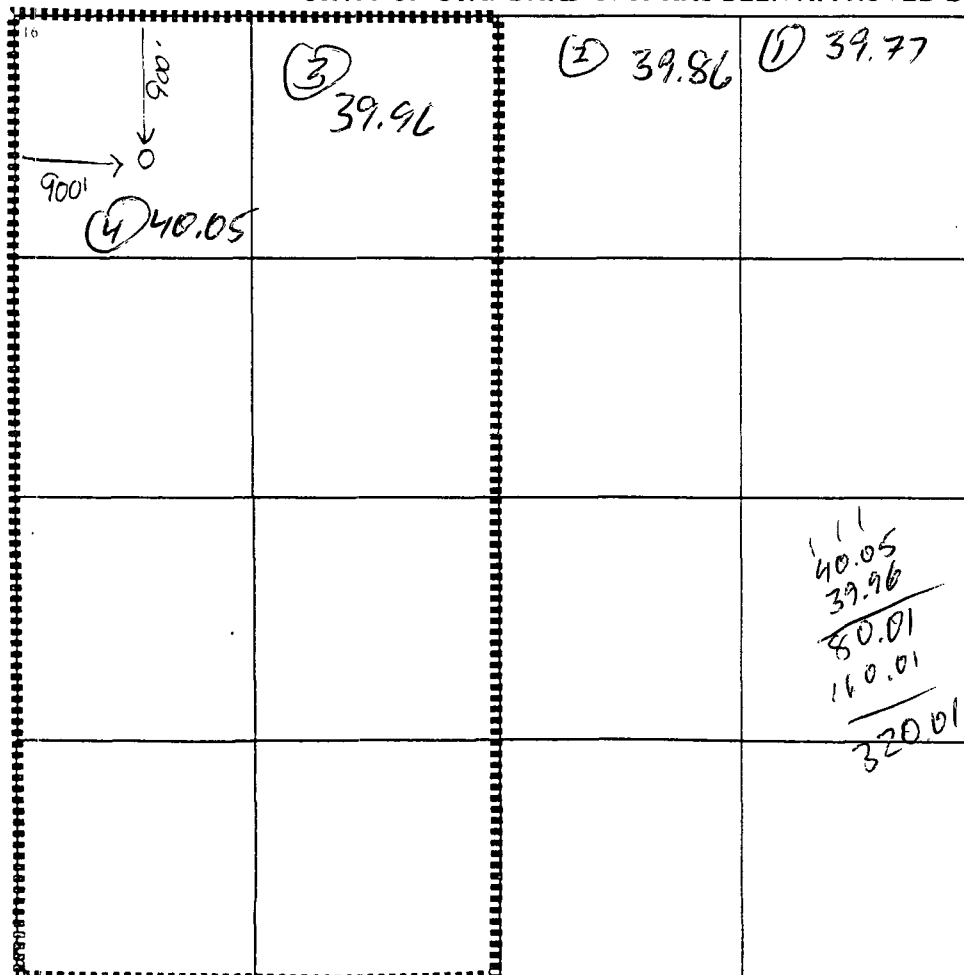
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	3	26N	11W		900	North	900	West	San Juan

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 320	13 Joint or Infill	14 Consolidation Code	15 Order No.
---------------------------	--------------------	-----------------------	--------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



17 OPERATOR CERTIFICATION

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

Kay Maddox
Signature

Printed Name
Kay MaddoxTitle
Regulatory AgentDate
April 22, 1998

Date

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey

Signature and Seal of Professional Surveyor:

Certificate Number

P 497 374 112

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
Amoco	
Street & Number	
PO Box 800	
Post Office, State, & ZIP Code	
Denver, Co 80201	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	

95

Return Receipt Showing to

P 497 374 114

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
Louis-Dreyfus	
Street & Number	
14000 Quail Springs Pkwy STE 600	
Post Office, State, & ZIP Code	
OKlahoma City, OK 73134-2600	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	

Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

P 497 374 113

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
Burlington Resources	
Street & Number	
PO Box 4289	
Post Office, State, & ZIP Code	
Farmington, Nm 87499	
Postage	\$
Certified Fee	
Special Delivery Fee	

P 497 374 047

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
LARRY F. Neely	
Street & Number	
PO Box 20657	
Post Office, State, & ZIP Code	
Albq. Nm 87154-0657	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	

P 497 374 111

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
Merrion O & G Corp	
Street & Number	
610 Reilly Ave	
Post Office, State, & ZIP Code	
Farmington, Nm 87401	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No 1004-0135
Expires: March 31, 1993

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

SUBMIT IN TRIPLICATE

070 FARMINGTON, NM

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

CONOCO INC.

3. Address and Telephone No.

10 DESTA DR. STE. 100W, MIDLAND, TX. 79705-4500 (915) 686-5424

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

Section 3, T-26-N, R-11-W, D
990' FNL & 990' FWL

5. Lease Designation and Serial No.

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Delhi Taylor D #1E

9. API Well No.

30-045-237960

10. Field and Pool, or Exploratory Area

Basin Fruitland Coal

11. County or Parish, State

San Juan, NM

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

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Repon
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☒ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracrunng
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Repon results of multiple completion Wd:
Completion or Recompletion Report and Log form.)

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.)*

It is proposed to recomplete this well to the Fruitland Coal using the attached procedure.

*** An unorthodox location application will be submitted

RECEIVED
APR 30 1998
OIL CON. DIV.
DIST. 3

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

Signed Kay Maddox Title Regulatory Agent

Date April 15, 1998

(This space for Federal or State office use)

Approved by /s/ Duane W. Spencer

Title

Date APR 28 1998

Conditions of approval if any:

BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FILE ROOM

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

*See Instruction on Reverse Side

NMOCD

**Delhi Taylor D #1E
Recomplete to Fruitland Coal
April 6, 1998**

API # -- 300452379600

LOCATION: Sec. 3, T- 26N, R - 11W, 900' FNL, 900' FWL, San Juan County.

Objective

Funds in the amount of \$99,000 are requested to provide surface facilities, recomplete to the Fruitland Coal Formation (1665' -1722'), and test and temporarily abandon Dakota by setting a composite bridge plug over the Dakota. This recompletion should result in a production increase of 100 mcf.

Wellbore Specs (See attached Wellview information)

Spud 11-11-79, completed 1-8-80, completed in Dakota sands (6294' - 6384'), stimulation consisted of 1500 gals. 15% HCl acid squeeze, followed by fracture stimulation w/80,000 gals. 30# cross linked gel, & 105,000# 20/40 sand.

PBTD: 6430', TD: 6470'. **Note:** Error made in report listing TD as 6570' and PBTD as 6535'.

PROD. CASING: 4-1/2", 10.50#, K-55 (208 jts) set @ 6470', DV tool @ 5168'.

Cement: 1st stage - 271 sxs 50/50 pozmix, 4% gel, tail in w/150 sxs w/2% CaCl,
2nd stage - w/1590 sx 50/50 w/4% gel, total cement = 2011 sxs.

SURFACE CASING: 9-5/8", 43.5#, N-80, 13 joints set @ 504'.

TOC (Class "B" neat w/2% CaCl, cement, circ. to surf)

TUBING: 2-3/8", 4.7#, J-55, Landed @ 6293' w/SN one joint off bottom

Note: No packer in hole.

EXISTING PERFS: DAKOTA: 6294' - 6333', 6356' - 6384'

PROPOSED PERFS: Rough perf interval is 1665 -70 and 1715' -22'
Run a GR-Neutron log for perf correlation.

Engr to pick perfs based on GR-Neutron log.

**Delhi Taylor D #1E
Recomplete to Fruitland Coal
April 6, 1998**

PROCEDURE

1. Pre Work

- A. Locate and test deadman anchors. Spot flowback pit (20x20) and prepare. Inform operator of work to be done and time frame. Check for location size and equipment placement. Identify any hazards (power lines, H₂S, tight equipment fits).
- B. Have pressure gauges on both casing and tubing when necessary (during acid, frac, testing).
- C. Hold Safety Meeting before rigging up to discuss potential hazards and meeting place in case of an emergency.

2. Pull Tubing, Clean Out to PBTD, blow hole dry and Test Dakota

- A. RU. Blow well down and kill with minimum amount of 1% KCl. NU BOP's
- B. POOH w/ 2 3/8" tbg string.
- C. RIH with 3.75" bit, 4 1/2" casing scraper and work string, clean out to PBTD (6430').
- D. Report fluid level and fill found in wellbore, test production to determine if Dakota production can be restored.
- E. Blow hole dry and POOH, bit, scraper & work string, standing back.
- F. RIH open ended tubing and test Dakota production, swab in if necessary. Obtain 4hr. stable flow rates. (report rates; pressures; etc for possible DHC application)
- G. POOH production test string standing back.

3. Set Bridge Plug, Test Casing, and Log Fruitland Coal Interval

- A. RU wireline. RIH and set EZ-Drill BP @ 6,250'. RD.
- B. Pressure test casing to 2500#, if it appears to be leaking RIH test string w/packer.
- C. Test BP, pick up and test until leak is isolated. Consult engineering on repair or additional BP set, and then notify regulatory agencies for approval.
- C. RU wireline, Run a GR-Neutron log for perf correlation. Rough perf interval is 1665 -70 and 1715' -22'

Delhi Taylor D #1E
Recomplete to Fruitland Coal
April 6, 1998

4. Pick Perforation Depths & Perforate

RU wireline select fire perforating gun and perforate the Fruitland Coal formation using a 3 1/8" HSC w/ .32" holes as follows (22 GRAMS OR HIGHER): Engr to pick perms based on GR-Neutron log.

5. Acidize and Break Down Perforations

- A. PU workstring & 4 1/2" pinpoint packer & RIH; break down each perforation with 1/2 barrel 15% HCl acid. POOH packer and workstring.
- B. Prepare to foam frac down casing if it tested OK or RIH frac string and packer.
- C. Proceed w/ single stage foam frac as per BJ attached procedure.
- D. Obtain 5, 10, 15 min ISIP shut-in pressures, then bleed off.

6. Flow Back Clean Up & Return Well to Production

Attempt to flow the FC back. If unsuccessful, POOH w/ frac string assembly (if run), RIH w/ production tubing w/SN & mule shoe on bottom & C/O to BP. Unload using air or gas, pull up and land tubing end at mid perms FC. Install plunger & put in swab mode; put on production.. Monitor well for rate at least one week.

West Team

District I
PO Box 1980, Hobbs. NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd. Aztec, NM 87410

District IV
PO Box 2088, Santa Fe. NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

PO Box 2088
Santa Fe, NM 87504-2088

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FOR NZL
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APR 27 PM 1:24

Form C-102

Revised February 21, 1994
instructions on back

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

070 FARMINGTON, NM ☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-23796	2 Pool Code 71629	3 Pool Name Basin Fruitland Coal
4 Property Code 003039	5 Property Name Delhi Taylor D	6 Well Number #1E
7 OGRID No. 005073	8 Operator Name Conoco Inc., 10 Desta Drive, Ste. 100W, Midland, TX 79705-4500	9 Elevation 3404'

10 Surface Location

UL or lot no. D	Section 3	Township 26N	Range 11W	Lot Idn	Feet from the 900	North/South line North	Feet from the 900	East/West line West	County San Juan
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11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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12 Dedicated Acres 320	13 Joint or Infill	14 Consolidation Code	15 Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16			

17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

Signature: *Kay Maddox*

Printed Name: Kay Maddox

Title: Regulatory Agent

Date: April 22, 1998

Date

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey

Signature and Seal of Professional Surveyor:

Certificate Number

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Designation and Serial No. SF-078641-A
2. Name of Operator AMOCO PRODUCTION COMPANY		6. If Indian, Allottee or Tribe Name
Attention: Pat Archuleta		7. If Unit or CA, Agreement Designation
3. Address and Telephone No. P.O. BOX 800 DENVER, COLORADO 80201 303-830-5217		8. Well Name and No. Delhi Taylor #UD 1-E
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 900' FNL 900' FWL Sec. 03 T 26N R 11W UNIT D		9. API Well No. 3004523796
		10. Field and Pool, or Exploratory Area Basin Dakota
		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 checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Amoco Production Company requests permission for a 60 day extension on this well.

On 11/19/97 Buddy Shaw spoke to Brian Davis at the BLM and received a verbal approval on this.

RECEIVED
DEC - 1 1997
OIL CON. DIV.
DIST. 3

RECEIVED
BLM
97 NOV 24 AM 8:46
070 FARMINGTON, NM

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

Signed

Pat Archuleta

Title

Staff Assistant

Date

11-21-1997

(This space for Federal or State office use)

Approved by

/s/ Duane W. Spencer

Title

Date

NOV 24 1997

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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-078641-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Delhi Taylor PUD 1-E

9. API Well No.

3004523796

10. Field and Pool, or Exploratory Area

Basin Dakota

11. County or Parish, State

San Juan New Mexico

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Amoco Production Company

Attention:

Pat Archuleta, Room 1205C

3. Address and Telephone No.

P.O. Box 800, Denver, Colorado 80201

(303) 830-5217

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

990'FNL 990'FWL Sec. 03 T 26N R 11W Unit D

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

TYPE OF SUBMISSION

TYPE OF ACTION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Letter 9/20/96

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)

Amoco Production Company Requests permission to plug and abandon this well per the attached procedures.

Reference letter NMSF-078641A (WC) 3162.3-4 (7400).

If you have any questions contact Dave Smith at (3003) 830-4502.

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

Signed

Title

Staff Assistant

Date

11-20-1996

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

APPROVED

DEC 02 1996

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.

DISTRICT MANAGER

/S/ Duane W. Spencer

* See Instructions on Reverse Side

Delhi Taylor PUD #1E
Orig. Comp. 12/79
TD = 6470', PBTD = 6430'
Page 2 of 2

1. Check location for anchors. Install if necessary. Test anchors.
2. MIRUSU. Blow down well. Kill if necessary with fresh water. NDWH. NUBOP.
3. POOH with 2 3/8" tbg. RIH with tbg and CIBP. Set CIBP at 6244'. Test csg integrity to 500#. Spot 100' cement plug on top of CIBP. (13 cuft cement). Pull up hole and spot 100' cement plug across the Mesaverde at 3245' to 3345'. (13 cuft cement), Chacra at 2579' to 2679'. (13 cuft cement), Pictured Cliff at 1670' to 1770'. (13 cuft cement), Fruitland at 1411' to 1511'. (13 cuft cement), Ojo Alamo at 630' to 730'. (13 cuft cement), and 504' to surface. (50 cuft cement).
4. NDBOP. Cut off casing and wellhead. Install PXA marker according to BLM or State requirements.
5. Contact FMC and ship surface equipment to yard or other location per instructions.
6. Turn over to John Schwartz for reclamation.
7. Rehabilitate location according to BLM or State requirements.

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico CONSERVATION DIVISION
Energy, Minerals & Natural Resources
Department

97957501
Form C-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address AMOCO PRODUCTION COMPANY 200 AMOCO COURT FARMINGTON, NM 87401		² OGRID Number 000778
		³ Reason for Filing Code CO
⁴ Well Number 30-152379600	⁵ Pool Name BASIN-DAKOTA-GAS	⁶ Pool Code 071599
⁷ Property Code 00429	⁸ Property Name DELHI TAYLOR D 1&1E	⁹ Well Number 1E

II. ¹⁰Surface Location

¹¹ U/L or lot no. D	¹² Section 0003	¹³ Township 026	¹⁴ Range 011	¹⁵ Lot.Idn	¹⁶ Feet from the 990	¹⁷ North-south Line N	¹⁸ Feet from the 990	¹⁹ East/West Line W	²⁰ County SAN JUAN
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²¹Bottom Hole Location

²² U/L or lot no.	²³ Section	²⁴ Township	²⁵ Range	²⁶ Lot.Idn	²⁷ Feet from the	²⁸ North/South Line	²⁹ Feet from the	³⁰ East/West Line	³¹ County
³² Use Code E	³³ Producing Method Code	³⁴ Gas Connection Date	³⁵ C-129 Permit Number	³⁶ C-129 Effective Date	³⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

³⁸ Transporter OCID	³⁹ Transporter Name and Address	⁴⁰ POD	⁴¹ O/G	⁴² POD ULSTR Location and Description
018	GIANT REFINING BOX 1 999 SCOTTSDALE AZ 85267	0166510	O	
7057	EPNG P.O. BOX 4990 FARMINGTON NM 87499	0166530	G	

IV. Produced Water

⁴³ POD	⁴⁴ POD ULSTR Location and Description
-------------------	--

V. Well Completion Data

⁴⁵ Spud Date	⁴⁶ Ready Date	⁴⁷ TD	⁴⁸ PBTD	⁴⁹ Perforations
⁵⁰ Hole Size	⁵¹ Casing & Tubing Size	⁵² Depth Set	⁵³ Sacks Cement	

VI. Well Test Data

⁵⁴ Date New Oil	⁵⁵ Oil Delivery Date	⁵⁶ Test Date	⁵⁷ Test Length	⁵⁸ Tbg. Pressure	⁵⁹ Csg. Pressure
⁶⁰ Choke Size	⁶¹ Oil	⁶² Water	⁶³ Gas	⁶⁴ AOP	⁶⁵ Test Method
⁶⁶ I hereby certify that the rules 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. Signature: <i>J. P. Shaheen</i> Printed Name: J. P. SHAAHEEN Title: SENIOR BUSINESS ANALYST Date: 9/27/95			<div>OIL CONSERVATION DIVISION</div> <div>Approved by: <i>[Signature]</i> Title: SUPERVISOR DISTRICT #5 Approval Date: SEP 27 1995</div>		
Phone: (505) 326-9413					

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Amoco Production Company	Well APN No. 3004523796
Address 1670 Broadway, P. O. Box 800, Denver, Colorado 80201	
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 Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155	

II. DESCRIPTION OF WELL AND LEASE

Lease Name DELHI TAYLOR D	Well No. 1E	Pool Name, Including Formation BASIN (DAKOTA)	FEDERAL	Lease No. SF079232
Location Unit Letter D : 900-996 Feet From The FNL Line and 900-996 Feet From The FWL Line Section 3 Township 26N Range 11W , NMPM, SAN JUAN 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) P. O. BOX 256, FARMINGTON, NM 87499
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) P. O. BOX 1492, EL PASO, TX 79978
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			
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 (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.

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

OIL CONSERVATION DIVISION

Date Approved **FEB 08 1989**
By *[Signature]*
Title **SUPERVISION 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.

DISTRIBUTION
LANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

30-045-23796

I. Operator
Tenneco Oil Company
Address
720 S. Colorado Blvd., Denver, CO 80222
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name: Delhi Taylor D. Well No.: 1-E Pool Name, including Formation: Basin Dakota Kind of Lease: Federal Lease No.: SF-078641-A
Location
Unit Letter: D Feet From The North Line and Feet From The West
Line of Section: 3 Township: 26N Range: 11W, NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒ Address (Give address to which approved copy of this form is to be sent)
Giant Refining P.O. Box 256, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas P.O. Box 990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks. Unit: D Sec: 3 Twp: 26N Rge: 11W Is gas actually connected? No When: ASAP

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

V. 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: 11/11/79 Date Compl. Ready to Prod.: 1/8/80 Total Depth: 6570' P.B.T.D.: 6535'
Elevations (DF, RKB, RT, GR, etc.): 6272' GL Name of Producing Formation: Basin Dakota Top Oil/Gas Pay: 6294' Tubing Depth: 6293'
Perforations: 6294'-6384' (Dakota) Depth Casing Shoe:
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE: 12 1/2" CASING & TUBING SIZE: 8 5/8" DEPTH SET: 504' SACKS CEMENT: 325 SXS
7 7/8" 4 1/2" 6570' 2011 SXS
2 3/8" 6293'

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 Tanks: 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 WELL
Actual Prod. Test-MCF/D: 938 Length of Test: 3 hrs Bbls. Condensate/MMCF: Gravity of Condensate:
Testing Method (pilot, back pr.): back pressure Tubing Pressure (Shut-in): 625 Casing Pressure (Shut-in): 650 Choke Size: 3/4"

VI. CERTIFICATE OF COMPLIANCE
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
Administrative Supervisor
1/17/80
OIL CONSERVATION COMMISSION
APPROVED: FEB 1 1980
BY: Signed by FRANK T CHAVEZ
TITLE: SUPERVISOR DISTRICT # 3
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Form C-104 must be filed for each pool in multiple

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 ☐ gas ☒ other ☐
well well

2. NAME OF OPERATOR

Tenenco Oil Company

3. ADDRESS OF OPERATOR

720 S. Colo. Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

900'FNL, 900'FWL, Unit D

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

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

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) cement tops

5. LEASE

SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Delhi-Taylor RD

9. WELL NO.

1E

10. FIELD OR WILDCAT NAME

Basin Dakota

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

Sec. 3; T26N; R11W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS: (SHOW DF, KDB, AND WD)
6272'GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

2/14/80

The cement was circulated to surface behind the 8 5/8" and 4 1/2" casings

Subsurface Safety Valve: Manu. and Type

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

SIGNED

Carley Vetter

TITLE Admin. Supervisor

DATE

2/15/80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED FOR RECORD

FEB 15 1980

BY *M. L. Richers*

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
Tenenco Oil Company

3. ADDRESS OF OPERATOR
720 S. Colo. Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 900'FNL, 900'FWL, Unit D
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) cement tops

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE
SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Delhi-Taylor #3D

9. WELL NO.
1E

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
Sec. 3; T26N; R11W

12. COUNTY OR PARISH San Juan 13. STATE New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6272'GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

2/14/80

The cement was circulated to surface behind the 8 5/8" and 4 1/2" casings

Subsurface Safety Valve: Manu. and Type _____

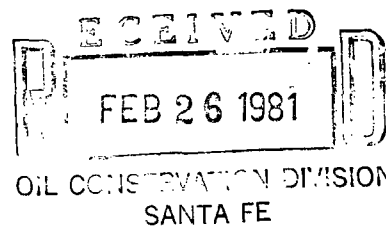
18. I hereby certify that the foregoing is true and correct

SIGNED Carley Vatten TITLE Admin. Supervisor DATE 2/15/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

EL PASO NATURAL GAS COMPANY
POST OFFICE BOX 990
FARMINGTON, NEW MEXICO



NOTICE OF GAS CONNECTION

(4)

DATE February 23, 1981

THIS IS TO NOTIFY THE OIL CONSERVATION COMMISSION THAT CONNECTION FOR PURCHASE OF

GAS FROM Tenneco Oil Company
OperatorDelhi Taylor D#1-E
Well Name93-487-01

Meter Code

74820-51

Site Code

D

Well Unit

3-26-11

S-T-R

Basin Dakota

Pool

El Paso Natural Gas Company

Name of Purchaser

WAS MADE ON 2-4-81
DateFIRST DELIVERY 2-9-81
DateAOF 938CHOKE 863El Paso Natural Gas Company

Purchaser

Original Signed By W. M. KENNEDY

Representative

Chief Dispatcher

Title

cc: Operator
Oil Conservation Commission - 2
Proration - El Paso

File

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR Tenneco Oil Company							
3. ADDRESS OF OPERATOR 720 S. Colorado Blvd., Denver, CO 80222							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 900' FNL, 900' FWL, Unit D At top prod. interval reported below NW/4, NW/4 At total depth							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPOOLED 11/11/79							
16. DATE T.D. REACHED 11/21/79		17. DATE COMPL. (Ready to prod.) 1/8/80		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6272' GL		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 6570'		21. PLUG, BACK T.D. MD & TVD 6535'		22. IF MULTIPLE COMPL. HOW MANY*		23. INTERVALS DRILLED BY	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6294'-6384' (Dakota)		25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN Induction-GR, Densilog		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		K-55, 24#		504'		12 1/4"	
4 1/2"		K-55, 10.5#		6570'		7 7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
2 3/8"		6293'					
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2 3/8"		6293'					
31. PERFORATION RECORD (Interval, size and number) 6294-6333 (2 SPF) (134 holes) 6356-6384							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED					
6294-6384		1500 gal. 15% HCL 105,000# sand 80000 gal. 30% crosslinked gel					
33. PRODUCTION							
DATE FIRST PRODUCTION 1/16/80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing				WELL STATUS: (Producing or shut-in) Shut-in	
DATE OF TEST 1/8/80		HOURS TESTED 3		CHOKE SIZE 3/4		PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS. 52		CASING PRESSURE 203		CALCULATED 24-HOUR RATE		OIL—BBL. AOF=938	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented							
35. LIST OF ATTACHMENTS Electric logs forwarded by Dresser Atlas							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED		TITLE Admin. Supervisor					
DATE 1/21/80		BY					

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

OPERATOR

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions 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. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

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 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Seals Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

31. SUMMARY OF POROUS ZONES:				GEOLOGIC MARKERS	
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				NAME	MEAS. DEPTH
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		TRUE VERT. DEPTH
Ojo Alamo	680	790	sand, water	Greenhorn	6128
Pictured Cliffs	1720	1800	sand, water		
Chacra	2630	2725	sand, water		
Cliffhouse	3335	3350	sand, water		
Point Lookout	4150	4470	sand, shale, water		
Gallup	5340	5640	shaly sand, oil		
Dakota	6294	6416	sand, gas		
Morrison	6416	TD (6470)	sand, water		

871-233

U.S. GOVERNMENT PRINTING OFFICE: 1963-O-683636

GPO 837,497

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R3555.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____				5. LEASE DESIGNATION AND SERIAL NO. SF-078641-A	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME I-149-IND-9108	
2. NAME OF OPERATOR Tenneco Oil Company				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 720 S. Colorado Blvd., Denver, CO 80222				8. FARM OR LEASE NAME Delhi Taylor D	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 900' FNL, 900' FWL, Unit D At top prod. interval reported below NW/4, NW/4 At total depth				9. WELL NO. 1-E	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Basin Dakota	
15. DATE SPUDDED 11/11/79				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 3; T26N; R11W	
16. DATE T.D. REACHED 11/21/79				12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 1/8/80				13. STATE New Mexico	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6272' GL				19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 6570'		21. PLUG, BACK T.D., MD & TVD 6535'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY 0-TD				24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6294'-6384' (Dakota)	
25. WAS DIRECTIONAL SURVEY MADE Yes				26. TYPE ELECTRIC AND OTHER LOGS RUN Induction-GR, Densilog	
27. WAS WELL CORDED No				28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
8 5/8"		K-55, 24#		504'	
4 1/2"		K-55, 10.5#		6570'	
HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
12 1/4"		325 SXS			
7 7/8"		2011 SXS			
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
SACKS CEMENT*		SCREEN (MD)			
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
2 3/8"		6293'			
31. PERFORATION RECORD (Interval, size and number) 6294-6333 (2 SPF) (134 holes) 6356-6384					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
6294-6384		1500 gal 15% HCL			
		105,000# sand 80000 gal 30# crosslinked gel			
33. PRODUCTION					
DATE FIRST PRODUCTION 1/16/80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing			
DATE OF TEST 1/3/80		HOURS TESTED 3		CHOKE SIZE 3/4	
PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
				Q=863	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
52		203			
OIL—BBL.		GAS—MCF.		WATER—BBL.	
		AOF=938			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented					
35. LIST OF ATTACHMENTS Electric logs forwarded by Dresser-Atlas					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.					
SIGNED C. J. Taylor		TITLE Admin. Supervisor			

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

NM0001

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions 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. See instructions on Items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see Item 35.

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 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in Item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	680	790	sand, water	Greenhorn	6128	
Pictured Cliffs	1720	1800	sand, water			
Chacra	2630	2725	sand, water			
Cliffhouse	3335	3350	sand, water			
Point Lookout	4150	4470	sand, shale, water			
Gallup	5340	5640	shaly sand, oil			
Dakota	6294	6416	sand, gas			
Norrison	6416	TD (6470)	sand, water			

BEST COPY
available

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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
720 S. Colorado Blvd., Denver, CO 80222
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 900'FNL, 900'FWL, Unit D
AT TOP PROD. INTERVAL: NW/4 NW/4
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

(other) Status: spud, surface, production csg.

5. LEASE
SF-078641-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
I-149-IND-9108
7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Dehli Taylor D.
9. WELL NO.
1-E
10. FIELD OR WILDCAT NAME
Basin Dakota
11. SEC., T., R., M.; OR BLK. AND SURVEY OR AREA
Sec. 3; T26N; R11W
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6272'GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

11/11/79-12/10/79

Spudded 12 1/4" hole 11/11/79. Ran and set 8 5/8", K-55, 24# csg @ 504'. Cmt w/325 sxs class B neat w/2% CACL2. WOC 12 hrs. Reduced hole to 7 7/8". Reached TD of 6570' on 11/21. Ran and set 4 1/2", 10.5# K-55 csg @ 6470'. Cmt first stage w/271 sxs of 50/50 Pozmix w/4% gel and tailed in w/150 wxs w/2% CACL2 (421 total). Cmt second stage w/1590 sxs 50/50 Pozmix w/4% gel. PDBPO. 12/10 WOCU.

Subsurface Safety Valve: Manu. and Type

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

SIGNED Carley Thornton TITLE Admin. Supervisor DATE 7/17/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

DISTRIBUTION		
SANTA FE	1	✓
FILE	1	
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL 1	
	GAS 1	
OPERATOR	2	
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

30-045-23796

I. Operator
Tenneco Oil Company
Address
720 S. Colorado Blvd., Denver, CO 80222
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Delhi Taylor ~~W.D.~~ Well No. 1-E Pool Name, Including Formation Basin Dakota Kind of Lease State, Federal or Fee Federal Lease No. SF-078641-A
Location 990
Unit Letter D : 900 Feet From The North Line and 900 Feet From The West
Line of Section 3 Township 26N Range 11W , NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Address (Give address to which approved copy of this form is to be sent)
Giant Refining P.O. Box 256, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas P.O. Box 990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks. Unit D Sec. 3 Twp. 26N Rge. 11W Is gas actually connected? No When ASAP

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'tv.	Diff. Res'tv.
		X	X					
Date Spudded 11/11/79	Date Compl. Ready to Prod. 1/8/80	Total Depth 6570'	P.B.T.D. 6535'					
Elevations (DF, RKB, RT, GR, etc.) 6272'GL	Name of Producing Formation Basin Dakota	Top Oil/Gas Pay 6294'	Tubing Depth 6293'					
Perforations 6294'-6384' (Dakota)			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8 5/8"	504'	325 SXS
7 7/8"	4 1/2"	6570'	2011 SXS
	2 3/8"	6293'	

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)

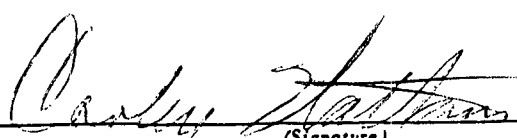
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

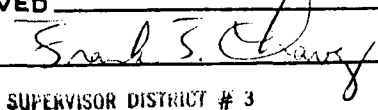
GAS WELL

Actual Prod. Test - MCF/D 938	Length of Test 3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) back pressure	Tubing Pressure (Shut-in) 625	Casing Pressure (Shut-in) 650	Choke Size 3/4"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


Administrative Supervisor
(Title)
1/17/80
(Date)

OIL CONSERVATION COMMISSION
APPROVED FEB 1 1980
BY 
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple

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 ☐ gas ☒ other ☐
2. NAME OF OPERATOR
Tenneco Oil Company
3. ADDRESS OF OPERATOR
720 S. Colorado Blvd., Denver, CO 80222
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990'FNL 900'FWL, Unit D
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

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* ☐

☐
☐
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☐
☐
☐

(other) Status Report: Completion

5. LEASE
SF-078641-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
~~1-149 IND 9108~~
7. UNIT AGREEMENT NAME:
8. FARM OR LEASE NAME
Dehli-Taylor ~~W.D.~~
9. WELL NO.
1-E
10. FIELD OR WILDCAT NAME
Basin Dakota
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
Sec. 3; T26N; R11W
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DFT, KDB, AND WD)
6272'FL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

12/21/79-1/16/80

MIRUCU. Spotted 500 gal 7½% acid. Perf'd Dakota @ 6294'-6333' and 6356'-6384'. Acidized w/1500 gal 15% HCL and 198 holes. Frac'd w/105,000# sand in 80,000 gal 30# crosslinked gel. Landed 2 3/8" tubing @ 6293' RDMSU on 12/28. Well died overnight. Moved on swabbing unit MIRUSU 1/2/80. Made 3 swab runs until flowing. On 1/8, shut in well pending AOF test.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED

Admin. Supervisor

DATE

1/17/80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

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
720 S. Colorado Blvd., Denver, CO 80222

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 900'FNL, 900'FWL, Unit D
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <u>change in drilling program</u>	<input type="checkbox"/>	<input type="checkbox"/>

5. LEASE
SF-078641-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
I-149-IND-9108

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Delhi-Taylor D.

9. WELL NO.
I-E

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 3, T26N, R11W

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

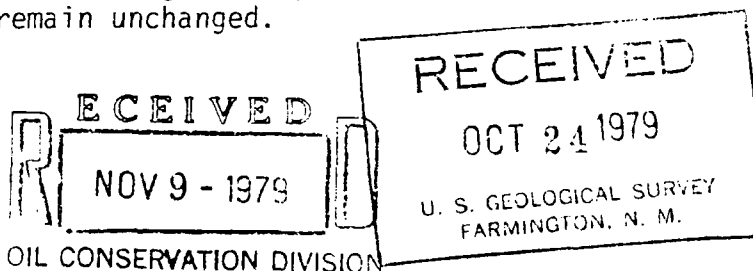
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6272'GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

We would like to change the drilling program for this well to utilize 4 1/2" 10.5# K-55 csg, rather than 5 1/2", 15.5# and 17#, K-55 csg, as indicated on the original Application for Permit to Drill. All other data will remain unchanged.



Subsurface Safety Valve: Manu. and Type SANTA FE

Set @ _____ Ft.

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

SIGNED Delhi Taylor TITLE Admin. Supervisor DATE 10/17/74

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC

All distances must be from the outer boundaries of the Section.

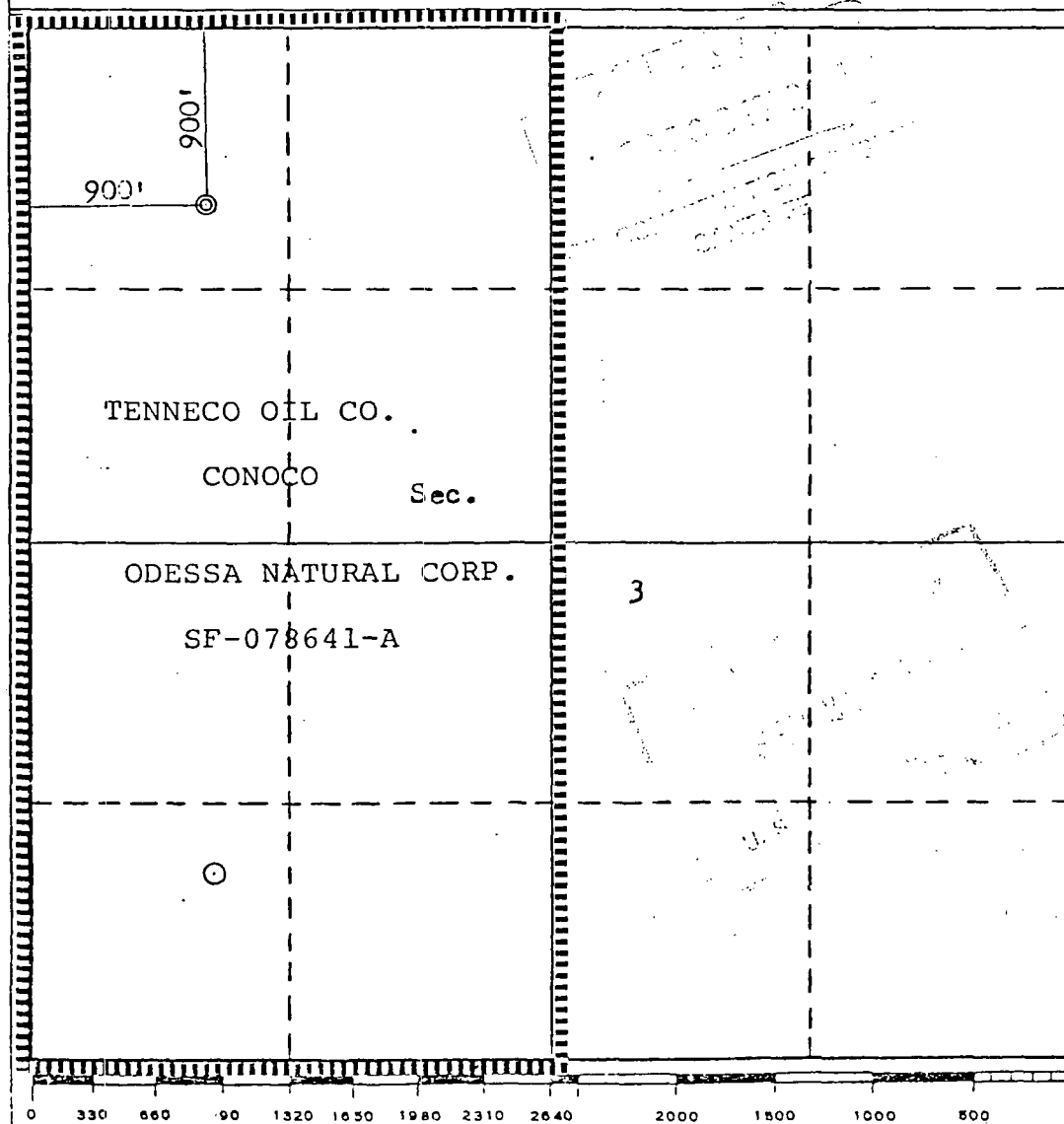
Operator TENNECO OIL COMPANY			Lease DELHI-TAYLOR W.D.		Well No. 1-E
Unit Letter D	Section 3	Township 26N	Range 11W	County San Juan	
Actual Footage Location of Well: 900 feet from the North line and 900 feet from the West line					
Ground Level Elev. 6272	Producing Formation Dakota		Pool Basin Dakota		Dedicated Acreage: <input checked="" type="checkbox"/> 320.01 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Communitized

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

Name J. A. Rush
 Position Environmental Coordinator
 Company Tenneco Oil Company
 Date September 14, 1979

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed July 24, 1979
 Registered Professional Engineer and/or Land Surveyor
Fred B. Kerr Jr.
 Certificate No. 3950

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☒

OTHER

SINGLE
ZONE ☐MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Tenneco Oil Company

3. ADDRESS OF OPERATOR

720 So. Colorado Blvd., Denver, Colorado 80222

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface

D 900' FNL, 900' FWL'
At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

See Point 1B, Surface Use Plan

10. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drig. unit line, if any)18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

16. NO. OF ACRES IN LEASE

19. PROPOSED DEPTH

6,438

17. NO. OF ACRES ASSIGNED
TO THIS WELL

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

6,272 G.L.

22. APPROX. DATE WORK

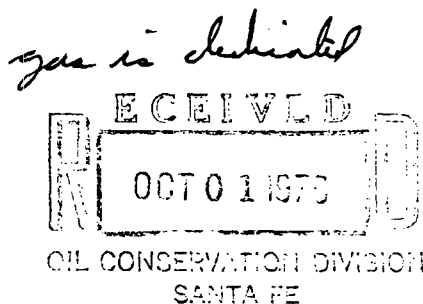
October 15,

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4"	8-5/8"	24#	500'	Suff. cement to circ.
7-7/8"	5-1/2"	15.5#, 17.0#	6,438	See 4 below

SEE ATTACHED



IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths, preventer program, if any.

24.

SIGNED

Division Production Manager

DATE

Sep 14

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

NMOCC

All distances must be from the outer boundaries of the Section.

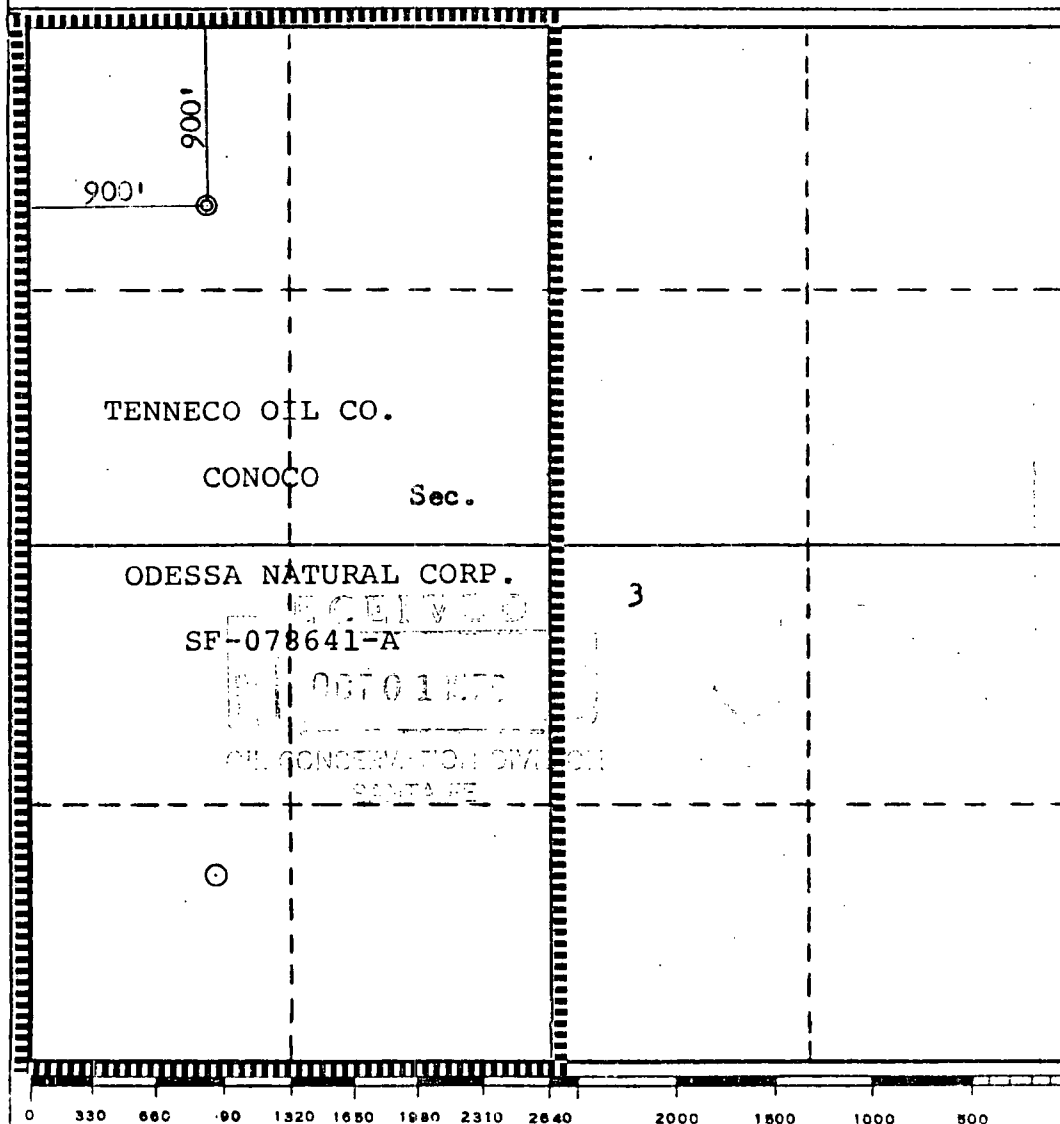
Operator TENNECO OIL COMPANY			Lease DELHI-TAYLOR W.D. D.		Well No. 1-E
Unit Letter D	Section 3	Township 26N	Range 11W	County San Juan	
Actual Footage Location of Well: 900 feet from the North line and 900 feet from the West line					
Ground Level Elev. 6272	Producing Formation Dakota		Pool Basin Dakota	Dedicated Acreage: 320.01 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☒ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

Name J. A. Ruck
Position Environmental Coordinator
Company Tenneco Oil Company
Date September 14, 1979

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed July 24, 1979
Registered Professional Engineer and/or Land Surveyor
Fred B. Kerr JR.
Certificate No. 3950