

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved,  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Contract 54

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jic. Aplache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Stromberg

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Ballard PC

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

SEC 34, T23N, R3W

12. COUNTY OR PARISH 13. STATE

Sandoval

NM

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

P. O. Box 990, Farmington, NM 87401,

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1650'/S, 1557'/E

14. PERMIT NO.

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

7199 GL

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 ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

Tubing Installation

(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.)\*

Jan. 12/1972<sup>73</sup> Ran 95 jts 1 14/" tubing 2.40# 10 RD NU IJ Vinson V-55. 2755.57'  
set at 2765.57.



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

SIGNED Allen J. Loeut

TITLE Production Engineer

DATE 2/14/73

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

DATE \_\_\_\_\_