Form 9-331 (May 1963)

UNITED STATES DEPARTMENT OF THE INTERIOR SUBMIT IN TRIPLICATES (Other instructions on reverse side) GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42 /R1424.
5. LEASE DESIGNATION AND SERIAL NO.

SF 078922

OIL WELL X OTHER 2. NAME OF OPERATOR El Paso Natural Gas Company 3. Address of Operator PO 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 11.70'N, 1700'E 14. Permit No. 15. Elevations (Show whether DF, RT, GR, etc.) 12.	INDIAN, ALLOTTEE OR TRIBE NAME
WELL WELL X OTHER 2. NAME OF OPERATOR E1 PASO Natural Gas Company 3. Anders of operator PO Box 990, Farmington, NM 87401 4. MOLTING OF WELL (Report location clearly and in accordance with any State requirements.* 10. See also space 17 below.) 1170'N, 1700'E 11. See 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other NOTICE OF INTENTION TO: SUBSEQUENT F FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* REPAIR WELL (Other) PRESENT Status CHANGE PLANS (Other) (Other) Present Status X (Note: Report results of mar (Notice) or Actorists of Market Proposed Work, if well is directionally defiled, give subsurface locations and measured and true vertical deprendent to this work, if well is directionally defiled, give subsurface locations and measured and true vertical deprendent of the well is being evaluated to determine it disposition. Periodic visits will be made to the well the wells condition does not change indicating a casin have occurred.	
2. NAME OF OPERATOR E1 Paso Natural Gas Company 3. Address of Operator PO Box 990, Farmington, NM 87401 4. Location of well. (Report location clearly and in accordance with any State requirements.* Note also squee 17 below.) At worker 11. OF The Notice of Intention to: Check Appropriate Box To Indicate Nature of Notice, Report, or Other NOTICE OF INTENTION TO: Subsequent F FRACTURE TREAT SHOOTING OR ACIDIZE REPAR WELL (Other) present Status (O	NIT AGREEMENT NAME
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At surface 1170'N, 1700'E 11. See also space 17 below.) 12. 170'N, 1700'E 13. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Notice of Intention to: TEST WATER SHUT-OFF PLUE OR ALTER CASING WATER SHUT-OFF FRACTURE TREAT SHOODS ARE ADADONS REPAIR WELL. (Other) Present Status (Note: Report results of me (Note: Report results	Canyon Largo Unit
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	ts future site to ascertain
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18. I hereby certify that the foregoing is true and correct	
SIGNED L. A. Almes TITLE Sr. Drilling Engineer	DATE January 17,197
(This space for Federal or State office use)	
APPROVED BYTITLE	