

Form 9-331 (May 1963)

UNITED STATES MENT OF THE INTEDIOD (Other instructions on re-

Form approved. Budget Bureau No. 42-R1424.

		SF 078910			
	(Do not use this for	RY NOTICES AND	to deepen or plug ba	ck to a different reservoir.	G. IF INDIAN, ALLOTTEE OR TRIBE NAME
1.	OIL GAS WELL X OTHER NAME OF OPERATOR E1 Paso Natural Gas Company ADDRESS OF OPERATOR P. O. Box 990, Farmington, New Mexico 87401 Lucation of Well (Report location clearly and in accordance with any State requirements.* At surface				7. UNIT AGREEMENT NAME Lindrith Unit Com 8. FARM OR LEASE NAME Lindrith Unit Com 9. WELL NO. 87 10. FIELD AND POOL, OR WILDCAT So. Blanco P.C.
	1000' N, 1730' W				Sec. 28, T-24-N, R-2-W NMPM
14.	PERMIT NO.	15. ELEVATIO	NS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH 13, STATE
			7155' GL		Rio Arriba New Mexic
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or				
	TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL	PULL OR ALTER MULTIPLE COM ABANDON* CHANGE PLANS		WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other)	X REPAIRING WELL ALTERING CASING ABANDONMENT*
·	(Other)	OUR FER OPERATIONS (Clau	rly state all pertinent	Completion or Reco	mpletion Report and Log form.) tes, including estimated date of starting any
	O6-25-77 Spudded well. Drilled surface hole. Ran 3 joints 8 5/8", 24#, K-55 surface casing, 125' set at 137'. Cemented with 159 cu. ft. cement. Circulated to surface. WOC 12 hours; held 600#/30 minutes.				
18.	I hereby certify that the	Gradfield	,	illing Clerk	DATE June 27, 1977
	APPROVED BY	DOVAL ID ANY	TITLE		DATE