

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 type="checkbox"/> X OTHER	7. UNIT AGREEMENT NAME Lindrith Unit
2. NAME OF OPERATOR El Paso Natural Gas Company	8. FARM OR LEASE NAME Lindrith Unit
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499	9. WELL NO. 95
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1700'N, 1800'E	10. FIELD AND POOL, OR WILDCAT S. Blanco Pic. Cliffs
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10, T-24-N, R-3 -W N.M.P.M.
15. ELEVATIONS (Show whether OF, TO, OR, etc.) 6936' GL	12. COUNTY OR PARISH 13. STATE Rio arriba NM

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* ☐

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

17. GIVE RISE 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.*

An extension until November 1, 1988 is requested to submit our plans for this well. A package is in routing and a sundry notice will be submitted when the package is approved by management.

RECEIVED
MAIL ROOM

88 SEP 30 PM 3:37

FARMINGTON, NEW MEXICO

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

SIGNED

James E. Edwards

TITLE Regulatory Affairs (CS)

DATE

09-30-88

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

OCT 24 1988

James E. Edwards
AREA MANAGER

*See Instructions on Reverse Side