Form 9-331 Dec. 1973

CONDITIONS OF APPROVAL, IF ANY:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)

Form Approved.

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Dec. 1973	Dudget Dateau 110: 42-11424
UNITED STATES DEPARTMENT OF THE INTERIOR	5. LEASE SF 078877
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT NAME Canyon Largo Unit
(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 🔽	8. FARM OR LEASE NAME Canyon Largo Unit
well well other 2. NAME OF OPERATOR	9. WELL NO. 291
El Paso Natural Gas Company 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Basin Dakota
Box 289, Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, T-24-N, R-6-W N.M.P.M.
AT SURFACE: 860'N, 1180'W AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE Rio Arriba New Mexico 14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6619' G.L.
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE	

(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.)*

PBTD 6899'. Tested casing 4000#, OK, Perfed 6646,6654,6755,6761,6766,6772, 6781,6794,6800,6806' W/1 SPZ. Fraced w/74,000# 20/40 sand, 52,000 gal. wtr. Flushed w/4,500 gal. wtr.

Subsurface Safety Valve: Manu, and Type _ 18. I hereby certify that the foregoing is true and correct Drilling Clerk Sept 17, 1979 TITLE DATE (This space for Federal or State office use) APPROVED BY