

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

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

SF 079266

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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>		NOV 4 1971 OIL CON. COM. DIST. 3	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company			7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401			8. FARM OR LEASE NAME Vaughn	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 990'N, 1190'E			9. WELL NO. 13	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6670'GL		10. FIELD AND POOL, OR WILDCAT Basin Dakota
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T-26-N, R-6-W NMPM
				12. COUNTY OR PARISH Rio Arriba
				13. STATE New Mexico

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.)*

on 5-23-71: Spudded well, drilled surface hole.

on 5-24-71: Ran 7 joints 9 5/8", 32.3#, H-40 surface casing, 225' set at 237' with 190 sacks cement circulated to surface. WOC 12 hours, held 600#/30 minutes.

6-11-71: T.D. 7569', ran 235 joints 4 1/2", 11.6 and 10.5#, KS, production casing, 7557' set at 7569'. Float collar at 7555', stage tools at 3141' and 5416'. Cemented first stage with 290 sacks cement, second stage with 215 sacks cement, third stage with 180 sacks cement. WOC 18 hours.

on 6-12-71: PBTD 7549', perf 7218-24', 7236-44', 7324-32', 7368-74', 7395-7401', 7416-24', 7438-50', 7510-22' with 18 shots per zone. Frac with 80,000# 40/60 sand, 80,000 gallons water, dropped five sets of 18 balls.

on 10-12-71: Re-frac above perfs with 45,000# 40/60 sand, 46,326 gallons water, dropped 7 sets of 18 balls, flushed with 5,000 gallons water.

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

SIGNED [Signature]

TITLE Petroleum Engineer

DATE November 1, 1971

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE NOV 3 1971

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
DURANGO, COLO.