

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 ☐ GAS WELL ☐ X OTHER  
2. NAME OF OPERATOR  
El Paso Natural Gas Company  
3. ADDRESS OF OPERATOR  
Post Office Box 4289, Farmington, NM 87499  
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface 1460'S, 1840'W

5. LEASE DESIGNATION AND SERIAL NO.  
SF 078879  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
Canyon Largo Unit  
8. FARM OR LEASE NAME  
Canyon Largo Unit  
9. WELL NO.  
241  
10. FIELD AND POOL, OR WILDCAT  
Devils Fork Gallup  
11. SEC., T., R., N., OR BLK. AND SURVEY OR AREA  
Sec. 23, T-25-N, R- 7-W  
N.M.P.M.  
12. COUNTY OR PARISH  
Rio Arriba  
13. STATE  
NM

14. PERMIT NO. SEP 17 1986  
15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
6810'GL

BUREAU OF LAND MANAGEMENT

16. FARMINGTON RESOURCE AREA

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. 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.)

A long term shut for this well is requested. The well is unable to produce in paying quantities under existing market conditions.

APPROVED

SEP 18 1986

AREA MANAGER

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

SIGNED

TITLE

Drilling Clerk

DATE

09-16-86

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 18 1986

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

NMOCG