

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number SF-078878
2. Name of Operator El Paso Natural Gas Company	6. If Indian, All.or Tribe Name
3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name Canyon Largo Unit
4. Location of Well, Footage, Sec, T, R, M. 990'S, 800'E Sec. 25, T-27-N, R-8-W, NMPM 28 25 7	8. Well Name & Number Canyon Largo Unit #173
	9. API Well No.
	10. Field and Pool Ballard Pic. Cliffs
	11. County and State Rio Arriba County, NM
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA	
Type of Submission	Type of Action
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut Off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

A confirmed casing leak has been isolated from the producing formation in the subject well by means of a packer and tbg. Due to pipeline contract delays, the well has not been allowed to produce and the well has not been evaluated. An additional six month test period is requested in hopes that the well can be properly evaluated and plans submitted to your office for repair or plug and abandonment.

RECEIVED

JUL 18 1990

OIL CON. DIV
DIST. 3

THIS APPROVAL EXPIRES DEC 31 1990

14. I hereby certify that the foregoing is true and correct
Signed [Signature] (LS) Title Regulatory Affairs Date 06-25-90

(This space for Federal or State office use)

APPROVED

APPROVED BY _____ TITLE _____
CONDITION OF APPROVAL, IF ANY:

JUL 12 1990
[Signature]
AREA MANAGER

NMOCD