## UNITED STATES SUBMIT IN TRIPLICATE\* DEPARTMENT OF THE INTERIOR (Other Instructions on reverse side)

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

D.	SF078880		
SUNDR' (Do not use this form Use	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
1.	7. UNIT AGREEMENT NAME		
WELL GAS WELL X	Canyon Largo Unit		
2. NAME OF OPERATOR	8. FARM OR LEASE NAME		
El Paso Natural (	Canyon Largo Unit		
3. ADDRESS OF OPERATOR	9. WELL NO.		
P. O. Box 990, Fa	armington, NM 87401	255	
4. LOCATION OF WELL (Report See also space 17 below.) At surface	t location clearly and in accordance with an Sian requirements.	Basin Dakota  11. sec., T., R., M., OR BLK. AND	
1550'S, 1530'W	Sec. 13, T-25-N, R-7-W N.M.P.M.		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, T. GR, etc.)	12. COUNTY OR PARISH 13. STATE	
	6847' GL	Rio Arriba New Mexico	

16.	Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data						
	NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:			
	TEST WATER SHUT-OFF		PULL OR ALTER CASING MULTIPLE COMPLETE		WATER SHUT-OFF FRACTURE TREATMENT	REFAIRING WELL ALTERING CASING	
	SHOOT OR ACIDIZE REPAIR WELL		ABANDON* CHANGE PLANS		(Other) (Note: Report results of multi	ABANDONMENT*	
	(Other)				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.)\*
  - 02-24-75 Spudded well. Drilled surface hole.
  - Ran 5 joints 9 5/8", 32.3#, H-40 surface casing, 194' set at 206'. Cemented with 236 cu. ft. cement. Circulated to surface. WOC 12 02-25-75 hours; held 600#/30 minutes.

SIGNED SIGNED	TITLE	Drilling Clerk	DATE February 26, 197
(This space for Federal or State office use)			
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE		DATE

