Form Approved. - - Budget Bureau No. 42-R1424

UNITED STATES DEPARTMENT OF THE INTERIOR

5.	LEASE Nav. allot Noo.
06-	C-14-20-5017
6.	IF INDIAN, ALLOTTEE OR TRIBE NAME
7.	UNIT AGREEMENT NAME
1	

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 eservoir. Use Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME			
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME			
1. oil gas well X other	Hostein Yazza			
Well Other	9. WELL NO.			
2. NAME OF OPERATOR	1			
El Paso Natural Gas Company	10. FIELD OR WILDCAT NAME			
3. ADDRESS OF OPERATOR	Basin Dakota			
Box 289, Farmington, New Mexico	11. SEC., T., R., M., OR BLK. AND SURVEY OR			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec. 26, T-25-N, R=9-W			
below.) AT SURFACE: 1900'S, 1130'W	N.M.P.M.			
AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE			
AT TOTAL DEPTH:	San Juan New Mexico			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	14. API NO.			
REPORT, OR OTHER DATA	1E CICVATIONS VALVEY			
,	15. ELEVATIONS (SHOW DF, KDB, AND WD)			
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6562' G1			
TEST WATER SHUT-OFF				
RACTURE TREAT				
SHOOT OR ACIDIZE REPAIR WELL	······································			
PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9-330.)			
MULTIPLE COMPLETE	change on Form 5-330.)			
CHANGE ZONES				
ABANDON*				
other)				
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 6614'. Tested casing to 4000#, OK. Perfed 6307,6355,6360,6365,6370,6375, 2-3-80: 6438,6445,6455,6460,6466,6472,6477,6482,6501,6506' W/1 SPZ. Fraced w/149,500# 20/40 sand, 74,000 gal. wtr. Flushed w/4000 gal. wtr.

Subsurface Safety Valve: Manu. and Ty	ype		Set @1 1980	Ft.
18. I hereby certify that the foregoing SIGNED	is true and correct TITLE _Drilling Clerk	DATE _	FEB TO COM	
	(This space for Federal or State office u	ise)		
APPROVED BY	TITLE	DATE		·

NMOCC

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

BY ML Rucheron