

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

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   | 7. UNIT AGREEMENT NAME<br>Rincon Unit   |
| 2. NAME OF OPERATOR<br>El Paso Natural Gas Company  | 8. FARM OR LEASE NAME<br>Rincon Unit  |
| 3. ADDRESS OF OPERATOR<br>Box 289, Farmington, New Mexico 87401   | 9. WELL NO.<br>126 (MD)   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br>At surface<br><br>800'S, 1850'W | 10. FIELD AND POOL, OR WILDCAT<br>Blanco MV & Basin Dakota                                |
| 14. PERMIT NO.  | 11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA<br>Sec. 27, T-27-N, R-6-W<br>N. M. P. M. |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>6635' GL  | 12. COUNTY OR PARISH<br>Rio Arriba  |
|   | 13. STATE<br>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 <input type="checkbox"/>                       | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>   | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREAT <input type="checkbox"/>                            | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input type="checkbox"/>   | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>                          | ABANDON* <input type="checkbox"/>             | SHOOTING OR ACIDIZING <input type="checkbox"/>  | ABANDONMENT* <input type="checkbox"/>    |
| REPAIR WELL <input type="checkbox"/>                               | CHANGE PLANS <input type="checkbox"/>         | (Other) <input type="checkbox"/>  |  |
| (Other) Perf & SWF Cliff House <input checked="" 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.)\*

We intend to workover this dually completed Mesa Verde-Dakota well to increase production by completing the Cliff House Section of the Mesa Verde in the following manner:

Pull both strings of tubing.

Run bridge plug set above Point Lookout at approximately 5200'.

Pressure test the casing to 3000 psi, run cement bond log and selectively perforate and sand water fracture the Cliff House from approximately 4876' to 4976'.

This well is not to be co-mingled.

Clean out and re-run tubing.

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

SIGNED *Wesley G. Busco* TITLE Drilling Clerk DATE 4-26-79

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

\*See Instructions on Reverse Side