

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

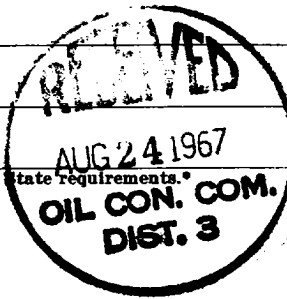
SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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 <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 707951
2. NAME OF OPERATOR El Paso Natural Gas Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico		7. UNIT AGREEMENT NAME Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any state requirements. See also space 17 below.) At surface 1145'S, 1715'W		8. WELL NO. Unit
14. PERMIT NO.		9. FIELD AND POOL OR WILDCAT Unit
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6943' OL		10. T.D.C., T., R., M., OR R.E. AND SURVEY OR AREA Unit
		11. COUNTY OR PARISH Unit
		12. STATE 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 checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" 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"/>	

(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.)*

8-2-67 spudded well, drilled surface hole and ran 10 joints 10 3/4" casing (302') set at 314' w/170 sacks of cement circulated to surface. W.O.C. 12 hours, tested w/600#/30 Min. O. K.

8-8-67 T. D. 4100'. Ran 125 joints 7 5/8", 26.40#, J-55 casing (4000') set at 4100' w/245 sacks of cement. W.O.C. 12 hours, tested w/1000#/30 Min. O. K.

8-14-67 T. D. 7927'. Ran 244 joints 5 1/2", 17# & 15.5#, J-55 casing (7927') set at 7927' w/320 sacks of cement. W.O.C. 12 hours, tested w/1500#/30 Min. O. K.

8-18-67 T. D. 8264'. Ran 13 joints 4", 11.6#, J-55 F. J. Liner (8264') set from 7859' to 8264' w/100 sacks of cement. W.O.C. 18 hours, tested w/1500#/30 Min. O. K.

8-19-67 P.B.T.D. 8229', tested to 4000# O. K. Spotted 300 gal. 1 1/2" HCL. Free w/1500# 40/60 sand, 50,220 gal. water. Max. pr. 4000#, SEP 2500#, tr. pr. 3100-3714-4000#. 11.2-10.7 BPM. Dropped 3 sets of 20 balls each, flushed w/8100 gallons of water. 15 Min. SIP 1650#.

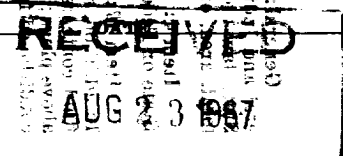
18. I hereby certify that the foregoing is true and correct

SIGNED Carl E. Matthews TITLE Petroleum Engineer DATE 8-23-67

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side