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## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-290-28	
7. Unit Agreement Name Johnston A	
8. Farm or Lease Name	
9. Well No. #13	
10. Field and Pool, or Wildcat Basin Dakota	
12. County Rio Arriba	

## 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER- <input type="checkbox"/>
Name of Operator El Paso Natural Gas Company		
Address of Operator P.O. Box 4289, Farmington, New Mexico 87499-4289		
Location of Well UNIT LETTER <u>G</u> <u>1840</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>36</u> TOWNSHIP <u>27</u> RANGE <u>6</u> NMPM.		

15. Elevation (Show whether DF, RT, GR, etc.)  
6599' GR.6. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

On August 18, 1983, work was completed to set a cement retainer to isolate a casing failure in the well. Swabbing operations have been semi-successful in restoring production from this well. We request a six month extension to continue our work with this well.

RECEIVED

AUG 13 1984

OIL CON. DIV  
DIST. 3

8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Production Engineer DATE August 13, 1984APPROVED BY Original Signed by CHARLES GHOLSONTITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

CONDITIONS OF APPROVAL, IF ANY:

Extended to Feb. 14, 1985DATE AUG 13 1984