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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-289-29
7. Unit Agreement Name Rincon Unit
8. Farm or Lease Name Rincon Unit
9. Well No. 131
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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator El Paso Natural Gas Company
3. Address of Operator P. O. Box 289, Farmington, New Mexico 87401
4. Location of Well UNIT LETTER <u>K</u> <u>1800</u> FEET FROM THE <u>South</u> LINE AND <u>1550</u> FEET FROM THE <u>west</u> LINE, SECTION <u>36</u> TOWNSHIP <u>27N</u> RANGE <u>7W</u> N.M.P.M.
15. Elevation (Show whether DF, RT, GR, etc.) 6552' GL

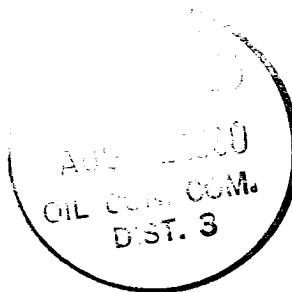
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <u>Temporarily isolate casing failure</u> <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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.

Run packer on tubing above Dakota perfs to isolate casing failure, check well for 90 days to determine if production can be regained sufficiently to squeeze cement casing leak.

Work well being August 4th or 5th, 1980.



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

SIGNED [Signature] TITLE Area Production Engineer DATE 8-4-80

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT 3 DATE AUG 4 1980

CONDITIONS OF APPROVAL, IF ANY:

Well must be repaired or plugged after 90 days