Foa 9-331 (May 1963)	UNITED ST DEPARTMENT OF	TATES THE INTERIO	SUBMIT IN TRIPLICATE (Other instructions on verse side)	TTE Budget Bureau No. 42-R1424.  5. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICA			SF 079394
CLIN	IDDY MOTICES AND	DEDODTS ON	I WELLS	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 reservoir.				
1.	Use "APPLICATION FOR PERMIT—" for such proposals.)			7. UNIT AGREEMENT NAME
OIL GAS WELL WELL	X OTHER			San Juan 27-5 Unit
2. NAME OF OPERATOR				8. FARM OR LEASE NAME
	ral Gas Company			San Juan 27-5 Unit
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401				9. WELL NO. 169
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.				10. FIELD AND POOL, OR WILDCAT
See also space 17 be At surface	Basin Dakota			
		, 00	'S, 840'W	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
				Sec. 33, T-27-N, R-5-W
11	1.15 0	15. ELEVATIONS (Show whether DF, RT, GR, etc.)		
14. PERMIT NO.	15. ELEVATIONS		GR, etc.) 6'GL	12. COUNTY OR PARISH 13. STATE
				Rio Arriba   NM
16.	Check Appropriate Box	c To Indicate Nati	ure of Notice, Report, o	or Other Data
	NOTICE OF INTENTION TO:	1	SUB	BREQUENT REPORT OF:
TEST WATER SHUT-	PULL OR ALTER C	ASING	WATER SHUT-OFF	X REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPI.	ETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABANDON MENT*
REPAIR WELL (Other)	CHANGE PLANS		(Other) (Note: Report res	sults of multiple completion on Well
17. DESCRIBE PROPOSED O	R COMPLETED OPERATIONS (Clearly	state all pertinent de	tails and give pertinent de	completion Report and Log form.) ates, including estimated date of starting any ertical depths for all markers and zones perti-
9-16-73	Spudded well. Drille surface casing, 218' circulated to surface.	set at 234'. C	Cemented with 215	cu.ft. cement,
18. I hereby certify that	the foregoing is true and correct		ling Clerk	September 17, 197
(This space for Fede	ral or State office use)			established
APPROVED BY		TITLE		DATE
CONDITIONS OF A	PPROVAL, IF ANY:			\$EP 10 1073
	*	See Instructions on	Reverse Side	

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