Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF079527

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☒ OTHER	**7. UNIT AGREEMENT NAME** San Juan 27-4 Unit
2. NAME OF OPERATOR El Paso Natural Gas Company	**8. FARM OR LEASE NAME** San Juan 27-4 Unit
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, NM 87401	**9. WELL NO.** 82
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1800'N, 800'E	**10. FIELD AND POOL, OR WILDCAT** Tapacito P. C. Ext. **11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA** Sec. 26, T-27-N, R-4-W N.M.P.M.

14. PERMIT NO.	**15. ELEVATIONS** (Show whether DF, RT, GR, etc.) 7174' GL	**12. COUNTY OR PARISH** Rio Arriba	**13. 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 ☐	PULL OR ALTER CASING ☐		WATER SHUT-OFF ☒	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐		FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐		SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐		(Other) _____	
(Other)			(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.) *

09-26-74   Spudded well. Drilled surface hole.
Ran 3 joints 8 5/8", 24# J-55 surface casing, 112' set at 124'. Cemented with 118 cu. ft. cement. Circulated to surface. WOC 12 hours; held 600#/30 minutes.

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

SIGNED _____   TITLE _Drilling Clerk_   DATE _September 30, 197_

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side