UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Form 9–331 Dec. 1973	Form Approved. Budget Bureau Ng. 42–R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	SF 079363
GEOLOGICAL SURVEY	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. Use Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME San Juan 28-6
	8. FARM OR LEASE NAME
1. oil ☐ gas ☑	San Juan 28-6 E
well well other	9. WELL NO. 207
2. NAME OF OPERATOR El Paso Natural Gas Company	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Basin Dakota
P.O. Box 289, Farmington, New Mexico 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec. 10, T-27-N, R-6-W N.M.P.M.
AT SURFACE: 850'S, 1180'W	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVÁL:	Rio Arriba New Mexico
AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO.
	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	6483' GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)

gas well X well other 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 (REPORT LOCATION CLEARLY. See space below.) AT SURFACE: 850'S, 1180'W AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTIC REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** ABANDON* (other) 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.)* Spudded well. Drilled surface hole. Ran 5 jts. 9 5/8", 32.3#, H-40 surface casing, 197' set at 209'. Cemented w/224 cu. ft. cement. Circulated to surface. WOC 12 hours; held 600#/30 minutes. Subsurface Safety Valve: Manu. and Type ___ <u>=</u> 18. I hereby pertify that the foregoing is true and correct April 9 Drilling Clerk (This space for Federal or State office use) TITLE DATE APPROVED BY CONDITIONS OF APPROVAL, IF ANY: 1-120-01-12-1 <u>स</u>्ब

See Instructions on Reverse Side

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