

F

30-039-20871

4-12-74

F. Loc. 810/N810/W Elev. 6739 GL Spd. _____ Comp. _____ TD _____ PB _____Casing S. _____ W _____ Sx. Int. _____ W _____ Sx. Pr. _____ W _____ Sx. T. _____
Csg. Perf. _____ Prod. Stim. _____T
R
A
N
S

I.P. _____ BO/D _____ MCF/D After _____ Hrs. _____ SICP _____ PSI After _____ Days GOR _____ Grav. _____ 1st Del. _____ S _____

TOPS		NITD	X	Well Log	TEST DATA						
					Schd.	PC	Q	PW	PD	D	Ref. No.
Kirtland		C-103		Plat	X						
Fruitland		C-104		Electric Log							
Pictured Cliffs				C-122							
Cliff House		Ditr		Dfa							
Menefee		Datr		Dac							
Point Lookout		160									
Mancos											
Gallup											
Sanostee											
Greenhorn											
Dakota											
Morrison											
Entrada											

P
O

TapacitoPC Co. RA S 9 T 27N R 5W UD Oper. EPNG CO Lse. San Juan 27-5 U No. 177

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

1. oil ☐ well gas ☒ well other ☐
2. NAME OF OPERATOR
El Paso Natural Gas Company
3. ADDRESS OF OPERATOR
PO Box 990, Farmington, New Mexico 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 810'N, 810'W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | REQUEST FOR APPROVAL TO: | | SUBSEQUENT REPORT OF: | |
|--------------------------|--------------------------|-----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | | <input type="checkbox"/> |
| (other) | <input type="checkbox"/> | | <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. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

This Pictured Cliffs location will not be drilled. An application to drill a Mesa Verde well in this location has been submitted as the San Juan 27-5 Unit #64A

5. LEASE
SF079391
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
San Juan 27-5 Unit
8. FARM OR LEASE NAME
San Juan 27-5 Unit
9. WELL NO.
177
10. FIELD OR WILDCAT NAME
Tapacito Pictured Cliffs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 9, T-27-N, R-5-W, NMPM
12. COUNTY OR PARISH
Rio Arriba
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6739'GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED A. G. Busco TITLE Drilling Clerk DATE 8-1-78

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

AUG 7 1978

U. S. GEOLOGICAL SURVEY
WASHINGTON, D. C.

San Juan 27-5 Unit #177

g-9-27N-5W

EPNG CO