

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 ☐ gas ☒ other ☐  
well well  
2. NAME OF OPERATOR  
El Paso Natural Gas Company  
3. ADDRESS OF OPERATOR  
P.O. Box 289, Farmington, New Mexico  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 810', 1125'E  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

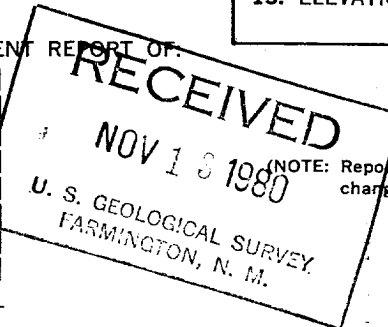
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) Isolate Casing Leak ☒

SUBSEQUENT REPORT OF:

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5. LEASE  
SF 080669  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
San Juan 27-4 Unit  
8. FARM OR LEASE NAME  
San Juan 27-4 Unit  
9. WELL NO.  
#74  
10. FIELD OR WILDCAT NAME  
Tapacito P.C. Ext.  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 17, T 27N, R 4W  
12. COUNTY OR PARISH 13. STATE  
Rio Arriba New Mexico  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
7175' G.L.

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

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.)\*

On October 30, 1980, a packer was installed on 1 1/4" tubing in the subject well as a temporary means of isolating the casing leak from the producing formation. This date marks the start of the 90 day evaluation period in which the operator will determine the feasibility and economics of permanently repairing the casing leak.

Subsurface Safety Valve: Manu. and Type

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

SIGNED William F. Clark TITLE Production Eng. DATE October 31, 1980

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE DATE

NMOCC

