Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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
   P.O. Box 289, Farmington, New Mexico

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
   AT SURFACE: 790'N, 790'W
   AT TOP PROD. INTERVAL:
   AT TOTAL DEPTH:

5. LEASE
   SF 080674

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.
   #75

10. FIELD OR WILDCAT NAME
    Tapacito P.C. Ext.

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
    Sec. 21, T27N, R4W

12. COUNTY OR PARISH | 13. STATE
    Rio Arriba | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
    7169' G.L.

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, 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) Isolate Casing Leak			

(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.)*

   It is proposed to temporarily isolate a casing failure by setting a packer on tubing in the subject well. Request that the 90 day evaluation period begin when the packer is installed.
   Work is estimated to be done in late October.

RECEIVED
OCT 21 1980
OIL CON. COM.
DIST 3

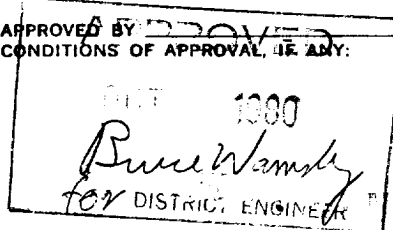Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct
   SIGNED William F Clark   TITLE Production Eng.   DATE Oct 20, 1980

(This space for Federal or State office use)

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

OCT 1980

Bruce Wamsly
FOR DISTRICT ENGINEER

ok 3rd
of O days
*See Instructions on Reverse Side