

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 ☐
2. NAME OF OPERATOR
El Paso Natural Gas Company
3. ADDRESS OF OPERATOR
PO Box 990, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1020'N, 980'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: | | 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 checked="" type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | | <input type="checkbox"/> |
- (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.)*

It is proposed to:
Set top drillable bridge plug above Mesa Verde perforations.
Test casing to 3500 psi.
Run cement bond log across Pictured Cliffs formation and cement squeeze if necessary.
Selectively perforate and sandwater fracture Pictured Cliffs formation.
Clean out well and run dual tubing strings.
Isolate producing formations with a packer.

Subsurface Safety Valve: Manu. and Type _____

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

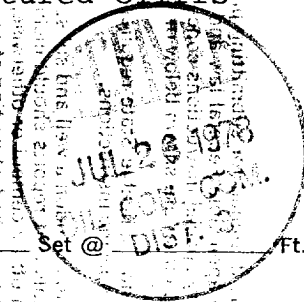
SIGNED A. P. Buice TITLE Drilling Clerk DATE July 20, 1978

(This space for Federal or State office use)

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

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. 121	
10. FIELD OR WILDCAT NAME Blanco MV & Tapacito PG	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18, T-27, N, R-4-W NMPM	
12. COUNTY OR PARISH Rio Arriba	13. STATE NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 6809' GR	

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



RECEIVED
JUL 25 1978

U. S. GEOLOGICAL SURVEY
DURANGO, COLO.