

F Aug. 2, 1974

30-039-20927

F. Loc. 1520/S; 1700/E Elev. 5787 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. SICIP PSI After Days GOR Grav. 1st Del. s		TOPS		NITD	Well Log	TEST DATA						
Kirtland				C-103	Plat	Schd.	PC	Q	PW	PD	D	Ref. No.
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  
O

Tapacito PC Co. RA S 10 T 27N R 4W U J Oper. EPN Co. Lse. SJ 27-4 Unit No. 106

SJ 27-4 Unit #106

J-19-27N-4W

El Paso Natural Gas Co.

Tapacito PC

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 080669

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 "APPLICATION FOR PERMIT—" for such proposals.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

Box 289, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1520'S, 1700'E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6787' GL

7. UNIT AGREEMENT NAME

San Juan 27-4 Unit

8. FARM OR LEASE NAME

San Juan 27-4 Unit

9. WELL NO.

106

10. FIELD AND POOL, OR WILDCAT

Tapacito P. C.

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 19, T-27-N, R-4-W  
N.M.P.M.

12. COUNTY OR PARISH

13. STATE

Rio Arriba

New Mexico

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

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.)\*

Please rescind the Application for Permit to Drill this location.



RECEIVED

DEC 04 1978

U. S. GEOLOGICAL SURVEY  
BURANGO, COLO.

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

SIGNED

*A. B. Bruce*

TITLE Drilling Clerk

DATE 11-30-78

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*ok Frank*

\*See Instructions on Reverse Side