

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | | 7. UNIT AGREEMENT NAME San Juan 27-4 Unit | |
| 2. NAME OF OPERATOR El Paso Natural Gas Company | | 8. FARM OR LEASE NAME San Juan 27-4 Unit | |
| 3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401 | | 9. WELL NO. 16A | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 850'N, 850'W | | 10. FIELD AND POOL, OR WILDCAT Tapacito Pic. Cliffs Blanco Mesa Verde | |
| 14. PERMIT NO. | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T-27-N, R-4-W NMPM | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6665'GL | | 12. COUNTY OR PARISH Rio Arriba | |
| | | 13. STATE NM | |

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

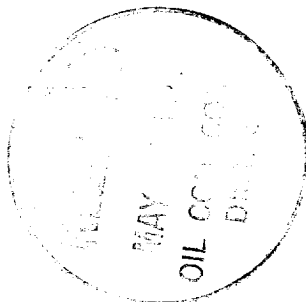
ABANDONMENT*

(Other) Number Name Change

(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.)*

The name of this well has been changed from the San Juan 27-4 Unit #134 to the San Juan 27-4 Unit #16A.



RECEIVED
APR 27 1977
U. S. GEOLOGICAL SURVEY
LAWRENCE, COLO.

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

SIGNED

D. P. Davis

TITLE

Drilling Clerk

DATE

April 25, 1977

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side