

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
Box 4289, Farmington, New Mexico 87499
-
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1300'S, 1350'W
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"/> |
| FRACTURE TREAT | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> |
| (other) | <input type="checkbox"/> |

RECEIVED (NOTE: Rec)

DEC 06 1983

BUREAU OF LAND MANAGEMENT
FARMINGTON POLICE AREA

(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.)*

12-5-83 Spudded well. Drilled surface hole. Ran 5 joints 9 5/8", 36.0#, K-55 surface casing (205') set at 217' w/142 cu. ft. cement circulated to surface. W.O.C. 12 hours. Held 600#/30 minutes.

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

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

SIGNED W. P. Busco TITLE Drilling Clerk DATE December 6, 1983

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

DEC 15 1983

NMOCC

***See Instructions on Reverse Side**

FARMINGTON RESOURCE AREA

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