

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 Post Office Box 4289, Farmington, NM 87499	9. WELL NO. 33
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1515'S, 910'E	10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11, T-27-N, R-4 -W N.M.P.M.
14. PERMIT NO.	12. COUNTY OR PARISH Rio Arriba
15. ELEVATIONS (Show whether DP, RT, GR, etc.) 6822' GL	13. STATE NM

AUG 08 1985

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)

7-24-85 Clean out to 6314'. Pressure test to 3500#, ok. Perf'd 6070', 6074', 6128', 6133', 6154', 6165', 6218', 6226', 6255', 6288' w/l spz. Frac'd with 19,000# 20/40 sand and 41,160 gallons treated water. Flushed with 8,190 gallons.

Perf'd second stage 5910', 5914', 5918', 5921', 5929', 5932', 5936', 5940', 5944', 5972', 5976', 5980', 5984', 5988', 5998', 6006', 6010', 6014', 6018', 6022' w/l spz. Frac'd with 106,000# 20/40 sand and 128,200 gallons treated water. Flushed with 8,020 gallons.

7-27-85 Set bridge plug at 4016'. Perf'd one squeeze hole at 3350'. Squeeze cemented Ojo Alamo with 150 sks. Class "B" with 2% calcium chloride (177 cu.ft.). WOC 18 hours.

7-28-85 Clean out to below squeeze. Tested casing, did not hold. Set packer at 3190'. Squeeze cemented with 75 sks. Class "B" with 2% calcium chloride (88 cu.ft.) WOC 18 hours.

7-29-85 Clean out squeeze cement, pressure tested casing to 1500 psi, held ok. Now cleaning out to PBTD with gas.

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

SIGNED Reggie L. Dosh

TITLE Drilling Clerk

DATE 8-7-85

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

AUG 13 1985

ACCEPTED FOR RECORD
DATE _____

OIL CON. DIV.

DIST. 3

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

NMOCC