

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions on reverse side)

Approved.
Bureau No. 42-R1424.

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		5. LEASE DESIGNATION AND SERIAL NO. SE 076005
2. NAME OF OPERATOR El Paso Natural Gas Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico		7. UNIT AGREEMENT NAME Musitano Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1920'S, 1980'E		8. FARM OR LEASE NAME Musitano Unit
14. PERMIT NO.		9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6530' GL		10. FIELD AND POOL, OR WILDCAT Undesignated P. C.
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 112. Sec. 25, T-26-N, R-8-W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

16. 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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

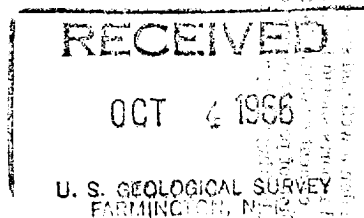
WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.) *

Due to non-commercial production and to non-economical workover conditions it is intended to plug and abandon this well in the following manner:

Spot 50 sack cement plug down tubing from 1855' to 2075'.
Determine free point of 7" casing. If there is enough casing free to be economical to recover, shoot off casing at the free point.
If casing is shot off, spot 30 sack cement plug on casing stub. Pull casing.
Put 10 sack cement plug in top of surface casing and install 4" x 4" permanent plug and abandonment marker.



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

SIGNED _____ TITLE **Petroleum Engineer**

DATE **10-4-66**

(This space for Federal or State office use)

APPROVED BY TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side