FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

## **UNITED STATES**

SUBMIT IN TRIPLICATE®

FRACTURE TREATMENT

(Other) .

SHOOTING OR ACIDIZING

Form approved.

	Dunker	Date	416 41	0./42	
LEASE	DESIGN	ATION	AND	SERIAL.	NO.

ALTERING CASING

ABANDONMENT\*

NOTICE OF INTE	PULL OR ALTER CASING	_	X REPAIRIN	G WELL				
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data								
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, 6574 'GL	GR, etc.)	12. COUNTY OR PAR. San Juan					
See also space 17 below.) At surface  1800'S, 800'E			NMF	R BLK. AND LEA 26-N, R-10-W M				
P.O. Box 990, Farming  A. Location of Well (Report location of	254 10. FIELD AND POOL, OR WILDCAT							
El Paso Natural Gas	Huerfano Unit.							
OIL GAS X OTHER			7. UNIT AGREEMENT HUETIAN 8. FARM OR LEAST N	0				
	CES AND REPORTS ON the design of the drill or to deepen or plug back TION FOR PERMIT—" for such propose	to a different reservoir.						
	MENT OF THE INTERIOR SEOLOGICAL SURVEY	( verse side)	SF 0780	14/				

(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.)\* (Other)

Spudded well. Drilled surface hole. 1-30-74

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

Ran 5 joints,  $8_5/8$ ", 24#, K-55 surface casing; 210' set at 226'. 1-31-74 Cemented with 182 cu.ft. cement, circulated to surface. WOC 12 Hours, held 600#/30 minutes.



FEB U. S. GEOLOGICAL SURVEY

18. I hereby certify that the foregoing is true and correct		· · · · · · · · · · · · · · · · · · ·	
SIGNED A SIGNED		rilling Clerk	DATE 2-5-74
(This space for Federal or State office use)			
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE		DATE