

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 Huerfano Unit
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME Huerfano Unit
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499		9. WELL NO. 125E
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1800'S, 830'W		10. FIELD AND POOL, OR WILDCAT Basin Dakota
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T-26-N, R-09-W N.M.P.M.
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6763' GL		12. COUNTY OR PARISH San Juan
		13. STATE NM

AUG 07 1985

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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"/>	

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.) \*

7-28-85 PBTD 6720'. Tested casing to 4000#, ok. Perf'd 6516', 6518', 6520', 6543', 6545', 6597', 6600', 6602', 6605', 6607', 6610', 6612', 6615', 6617', 6632', 6634', 6637', 6639', 6642', 6644' w/l spz. Fraced with 48,000# 40/60 sand and 67,440 gallons treated water. Flushed with 4,350 gallons water.

Ran 204 jts. 2 3/8", 4.7#, J-55 EUE tubing set at 6634'.

RECEIVED  
AUG 09 1985  
OIL CON. DIV.  
DIST. 3

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

SIGNED

TITLE Drilling Clerk

DATE

7-29-85

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

ACCEPTED FOR RECORD

1985

\*See Instructions on Reverse Side

FARMINGTON RECORD