Form	9-331
(May	1963)

UNITED STATES BUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved. Budget Burean No. 42-R1474. 5. LEASE DESIGNATION AND SERIAL NO.

GFOL	OGICAL	SURVEY
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SF 078498

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SUNDRY NOTICES AND REPORTS ON WELLS										

WELL WELL O	THER	San Juan 28-7 Unit 8. FARM OR LEASE NAME
El Paso Natural C	Gas Company	San Juan 28-7 Unit 9. WELL NO.
PO Box 990, Farm	nington, NM 87401	193
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 915'S, 1170'W		10. FIELD AND FOOL, OR WILDCAT Basin Dakota
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
		Sec. 28, T-28-N, R-7-W NMPM
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	6691'GL	Rio Arriba New Mexico

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

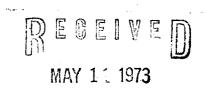
SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PULL OR ALTER CASING REPAIRING WELL TEST WATER SHUT-OFF WATER SHUT-OFF ALTERING CASING FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT SHOOTING OR ACIDIZING ABANDONMENT* SHOOT OR ACIDIZE ABANDON* CHANGE PLANS (Other) REPAIR WELL (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other)

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.)*

5-7-73 Spudded well. Drilled surface hole.

5-8-73 Ran 7 joints 9 5/8", 32.75#, HE surface casing, 206' set at 222'. Cemented with 225 cu.ft. cement, circulated to surface. WOC 12 hours, held 600#/30 min.





U. S. AEDEDREG AL SURVEY · Power IDO, CottO.

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S. I hereby certify that the foregoing is true and correct SIGNED L. J. Bleeco	Drilling Clerk	DATE	May 9, 1973
(This space for Federal or State office use)			
APPROVED BY	· TITLE	DATE.	
CONDITIONS OF APPROVAL, IF ANY:	TITUE	DAIN	