

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget 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. SF 078496-A
2. NAME OF OPERATOR El Paso Natural Gas Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401		7. UNIT AGREEMENT NAME San Juan 28-7 Unit
4. LOCATION OF WELL (Report location clearly and in accordance with an State requirements. See also space 17 below.) At surface 810'S, 1750'W		8. FARM OR LEASE NAME San Juan 28-7 Unit
14. PERMIT NO.		9. WELL NO. 188
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6625'GL		10. FIELD AND POOL, OR WILDCAT Basin Dakota
		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 26, T-28-N, R-7-W NMMPM
		12. COUNTY OR PARISH Rio Arriba
		13. STATE NM

## 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 type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" 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)			

(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.)\*

- 10-8-73 TD 3615'. Ran 114 joints 7", 20#, J-55 intermediate casing, 3604' set at 3615'. Cemented with 255 cu. ft. cement. WOC 12 hours, held 1200#/30 min. Top of cement at 2300'.
- 10-14-73 TD 7808'. Ran 247 joints 4 1/2", 11.6 and 10.5#, J-55 production casing, 7797' set at 7808'. Float collar set at 7802'. Cemented with 653 cu. ft. cement. WOC 18 hours. Top of cement at 5050'.
- 12-18-73 PBTD 7802'. Tested casing, held 4000#-OK. Perf'd 7547', 7564', 7659', 7661', 7688', 7702', 7736' and 7739' with one shot per zone. Frac'd with 50,000# 40/60 sand and 73,390 gallons treated water. No ball drops. Flushed with 5200 gallons water.

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

SIGNED [Signature]TITLE Drilling ClerkDATE January 3, 1974

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_