

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well gas well other

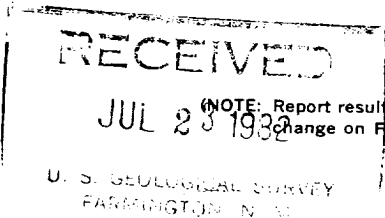
2. NAME OF OPERATOR
El Paso Natural Gas Co.

3. ADDRESS OF OPERATOR
P.O. Box 289 Farmington NM

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1000'N, 1690'W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input checked="" type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other)	



5. LEASE
SF-080505

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
San Juan 28-5 Unit

8. FARM OR LEASE NAME
San Juan 28-5 Unit

9. WELL NO.
59-M (MD)

10. FIELD OR WILDCAT NAME
Blanco M.V. and Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 30, T-28-N, R-5-W

12. COUNTY OR PARISH Rio Arriba 13. STATE NM

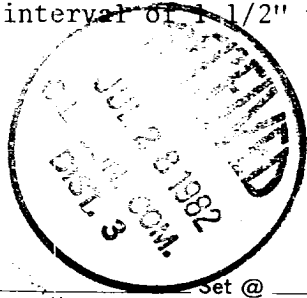
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6582' GL

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.)*

Request approval to change out approximately 2000' of paraffin plugged tubing on the Mesa Verde string. Proposed work will consist of the following operation.

M.O.L. & R.U. Kill Mesa Verde casing nipple up B.O.P. P.O.O.H. w/1 1/2" tbg until clear of plug lay down pipe, R.I.H. w/new interval of 1 1/2" tbg. Rig down and move off.



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct
SIGNED Mark Warner TITLE Production Engineer DATE July 23, 1982

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
JUL 27 1982

NMCCC

FARMINGTON DISTRICT
BY [Signature] *See Instructions on Reverse Side