UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

CHANGE ZONES ABANDON* (other)

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| Dec. 1973 | Form Approved. Budget Bureau No. 42-R1424 |
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| UNITED STATES DEPARTMENT OF THE INTERIOR | 5. LEASE SF 080117 |
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 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.) | 7. UNIT AGREEMENT NAME Huerfanito Unit |
| 1. oil gas | 8. FARM OR LEASE NAME Huerfanito Unit |
| well well other 2. NAME OF OPERATOR | 9. WELL NO. 98 |
| El Paso Natural Gas Company 3. ADDRESS OF OPERATOR | 10. FIELD OR WILDCAT NAME Blanco MV & Basin Dakota |
| PO Box 289, Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA |
| below.) AT SURFACE: 1500'N, 1650'E | Sec. 35, T-27-N, R-9-W, NMPN 12. COUNTY OR PARISH 13. STATE |
| AT TOP PROD. INTERVAL: AT TOTAL DEPTH: | San Juan NM |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, | 14. API NO. |
| REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WD) |
| REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL SUBSEQUENT REPORT OF: REPORT OF: SUBSEQUENT REPORT OF: REPORT OF: SUBSEQUENT REPORT OF: | (NOTE: Bosed south of with the |
| PULL OR ALTER CASING | change on Form 9-330.) |

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.)*

It is intended to repair a casing failure by pulling both strings of tubing, setting a retrievable bridge plug at 4475' and isolating the casing failure. The failure will be squeeze cemented with a sufficient amount of cement to repair the leak. After the well is cleaned out and tested to 1000 psi, the dual tubing strings will be rerun.

FARLINGION, N. M.

| Subsurface Safety Valve: Manu. and Type | Set @ Ft. | |
|---|--------------------|--|
| | - Ft. | |
| 18. I heraby certify that the foregoing is true and correct | - Septe in the | |
| SIGNED Project THE Drilling Engineer | 1-25-82 | |
| | 1-23-82 | |
| LUIS ace for Federal or State office use) | | |
| APPROVED BY | | |
| CONDITIONS OF APPROVAL GANTE 1002 | | |
| 0 3AI 20 130Z | | |
| For JAMES F. SIMS NMOCC | | |
| 1 100 States 1: Same | | |
| DISTRICT ENGINEER | | |
| See Instructions on Reverse Side | | |