Form 316	0-5
(Novembe	r 19831
(Formerly	9-331)

Form approved.
Budget Bureau No. 1004.

(November 1983) (Formerly 9-331)	UNITED STATES DEDARTMENT OF THE INTE	SUBMIT IN TRIPLICA Other instructions on	Expires Augus	st 31, 1085	
(10merry 9=331)	DEPARTMENT OF THE INTERIOR (Other Instructions on re-			5, LEASE DESIGNATION AND SERIAL NO.	
			NM 03541 6. IF INDIAN, ALLOTT	EE OR TRIBE NAME	
SUND! (Do not use this for	RY NOTICES AND REPORTS rm for proposals to drill or to deepen or pluse "APPLICATION FOR PERMIT—" for suc-	o ON WELLS LEED			
U	se "APPLICATION FOR PERMIT-" for suc	th proposale.)			
OIL GAS WELL WELL		RE 1085	7. UNIT AGREEMENT	(TME	
	OTHER	AUG 21 1985	NT 8. FARM OR LEASE NA	ME	
F.	1 Paso Natural Gas Com	IDADY WANAGEME	Hancock		
3. ADDRESS OF OPERATOR		TUREAU OF LANDESOURCE	9. WELL NO.		
4. LOCATION OF WELL (Repo	ost Office Box 4289 Fa	rmination, NM 87499	11		
See also space 17 below.) At surface	1 50 4 G O O O O O O O O O O O O O O O O O O	any State requirements.	10. FIELD AND POOL,		
E1 Paso Natural Gas Company B1 Paso Natural Gas Company B2 Post Office Box 4289, Farm Famous N. NM 87499 C. Location of Well (Report location clearly and in accordance with any State requirements.) At surface 1150'S, 810'E		Blanco Mes	Blanco Mesa Verde		
			Sec. 30. T-2	28-n, r-09-i	
			N.M.P.M.	•	
14. PERMIT NO.	15. ELEVATIONS (Show whether	DF, RT, GR, etc.)	12. COUNTY OR PARISI	H 13. STATE	
	· · · · · · · · · · · · · · · · · · ·	5996'GL	San Juan	NM	
16.	Check Appropriate Box To Indicate	Nature of Notice, Report, or	r Other Data		
NOTIC	CE OF INTENTION TO:	SUBS	EQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING	WELL	
PRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING C	ASING	
SHOOT OR ACIDIZE	ABANDON®	SHOOTING OR ACIDIZING	ABANDONME	MI.	
REPAIR WELL	CHANGE PLANS	(Other)	Running Casir		
(Other)	IPLETED OPERATIONS (Clearly state all pertin	tompletion or Recor	its of multiple completion upletion Report and Log for	em.)	
8-14-85	TD 2431'. Ran 58 jt 2419' set @ 2431'. Poz, with 6% gel, 2% perlite (299 cu.ft.) calcium chloride (11 min. Top of cement TD 4873'. Ran 65 jt 2591' set @ 4873'. hanger @ 2283'. Cem 2% gel and 0.6% flui Class "B" 50/50 Poz flocele, and 0.6% fl hours. Circulated 1	Cemented with 155% calcium chloride followed by 100 18 cu.ft.). WOC 1 at 500' by T.S. Es. 4 1/2", 10.5#, Float collar set the following	sks. Class "I and 1/2 cu.ft sks. Class "B' 2 hours. Held K-55 casing I @ 4859'. Top. Class "B" 5062 cu.ft.) and # gilsonite, I	3" 65/35 1./sack With 2% 1.1200#/30 liner, of liner 1/50 Poz, 1.285 sks.	
S. I hereby certify that the for	resoing is frue and correct	Orilling Clerk	AUG 2 3 1985 IL CON. DIV. DIST. 3	8-21-85	
(This space for Federal or	State office use)				
APPROVED BY	TITLE		AGGEPTED FOR	RECOR n	
CONDITIONS OF APPROV	'AL, IF ANY:		- ::- 	· **=~~***	

*See Instructions on Reverse Side

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