

30-039-20452

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
 DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
 OIL WELL GAS WELL OTHER
 SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
 El Paso Natural Gas Company

3. ADDRESS OF OPERATOR
 PO Box 990, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
 At surface
 800'S, 990'W
 At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drig. unit line, if any)

16. NO. OF ACRES IN LEASE

17. NO. OF ACRES ASSIGNED TO THIS WELL
 320.00

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH
 7800'

20. ROTARY OR CABLE TOOLS
 Rotary

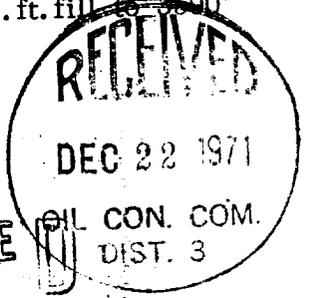
21. ELEVATIONS (Show whether DF, RT, GR, etc.)
 will be reported later.

22. APPROX. DATE WORK WILL START*

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
13 3/4"	9 5/8"	32.3#	200'	225 cu. ft. circulate
8 3/4"	7"	20.0#	3500'	220 cu. ft. cover Ojo Alamo
6 1/4"	4 1/2"	10.5&11.6#	7800'	640 cu. ft. fill to 3500'

Selectively perforate and sandwater fracture the Dakota formation.
 The S/2 of Section 31 is dedicated to this well.



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 DEC 21 1971

U. S. GEOLOGICAL SURVEY
 DURANGO, COLO.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED Original Signed F. W. WOOD TITLE Petroleum Engineer DATE December 20, 1971

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DECLARATION PLAT

EL PASO NATURAL GAS COMPANY

SAN JUAN 29-6 UNIT (NM-03010-A)

106

N 31 29-N 6-N RIO ARriba

800 SOUTH 990 WEST

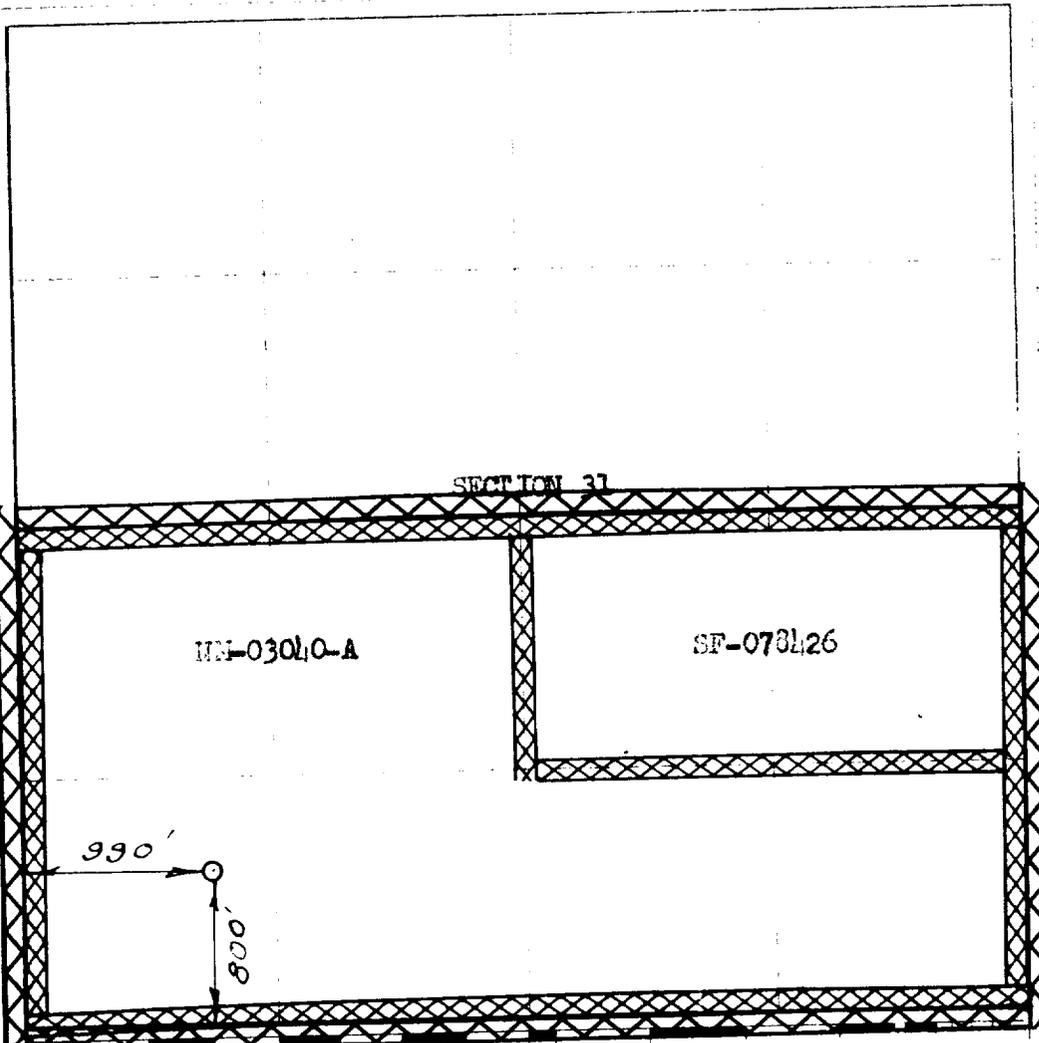
DAKOTA BASIN DAKOTA 320.00

1. Outline the acreage dedicated to the subject well by colored pen or machine marks on the plat.
2. If more than one lease is dedicated to the well, outline and identify the ownership, term, acreage, interest and royalty.
3. If more than one lease of different ownership is dedicated to the well, have the interests dated by communitization, unitization, force pooling, etc.

Yes No If answer is "no," type of communitization **Unitization**

If answer is "no," list the owners and tract descriptions which have actually been communitized on this form if necessary.

No allowable will be assigned to the well until all interests have been communitized or unitized or force pooled, or otherwise combined with a nonstandard tract, and having such interests has been approved by the Commission.



There is hereby declared to be a unitization of the following interests in the above described land to be dedicated to the subject well:

Original Signed F. H. WOOD
Petroleum Engineer
El Paso Natural Gas Co.
December 20, 1971

NOVEMBER 29, 1971

Paul Wilson
1760

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM 03040-A

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL GAS WELL OTHER

7. UNIT AGREEMENT NAME

San Juan 29-6 Unit

2. NAME OF OPERATOR
El Paso Natural Gas Company

8. FARM OR LEASE NAME

San Juan 29-6 Unit

3. ADDRESS OF OPERATOR
PO Box 990, Farmington, New Mexico 87401

9. WELL NO.

106

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

800'S, 990'W

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 31, T-29-N, R-6-W
NMPM

14. PERMIT NO.

15. ELEVATIONS (Show whether LF, RT, GR, etc.)

6822'GL

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

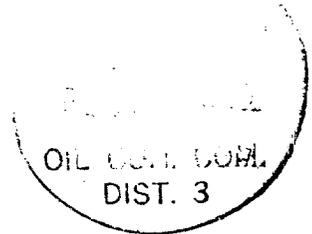
(Other) _____

Report Elevation

(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.)*



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FEB 3 1972

U. S. GEOLOGICAL SURVEY
DURANGO, COLO.

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

SIGNED Original Signed F. H. WOOD

TITLE: Petroleum Engineer

DATE February 1, 1972

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE: _____

DATE _____

Mod.

Dec. 22, 1977

30-059-20452

F. Loc. 800/S; 990/W Elev. 6822.64 Spd. Comp. TD PB

Casing S. @ W Sx. Int. @ W Sx. Pr. @ W Sx. T. @ Csg. Perf. Prod. Stim.

T
R
A
N
S

I.P. BO/D MCF/D After Hrs. SICP PSI After Days GOR Grav. 1st Del. s

TOPS		NITD	Well Log	TEST DATA								
				Schd.	PC	Q	PW	PD	D	Ref.No.		
Kirtland		C-103	Plot X									
Fruitland		C-104	Electric Log									
Pictured Cliffs			C-122									
Cliff House		Ditr	Dfa									
Menefee		Datr	Dac									
Point Lookout		<i>Abandoned Log per Report Received 11-18-74</i>										
Mancos												
Gallup												
Sanostee												
Greenhorn												
Dakota												
Morrison												
Entrada												
				S 320								

P
o
Basin Dax. Co. 30 S 31 T 29N R 0W U.M. Oper. EPNG Co. Lse. San Juan 29-6 Unit No. 106

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM03040-A

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 "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME San Juan 29-6 Unit
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME San Juan 29-6 Unit
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, NM 87401		9. WELL NO. 106
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 800'S, 990'W		10. FIELD AND POOL, OR WILDCAT Basin Dakota
14. PERMIT NO.		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, T-29-N, R-6-W N.M.P.M.
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6822' GL		12. COUNTY OR PARISH 13. STATE Rio Arriba New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROMISED 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.)*

The San Juan 29-6 Unit was acquired by Northwest Pipeline Corporation under the Divestiture Decree effective February 1, 1974, therefore, El Paso Natural Gas Company has abandoned this location.

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

SIGNED J. P. Buzas TITLE Drilling Clerk DATE November 5, 1974

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

St.
*See Instructions on Reverse Side