

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R-424.

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 078423
2. NAME OF OPERATOR El Paso Natural Gas Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 289, Farmington, New Mexico 87401		7. UNIT AGREEMENT NAME San Juan 29-7 Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  1640'S, 1120'E		8. FARM OR LEASE NAME San Juan 29-7 Unit
14. PERMIT NO.		9. WELL NO. 44A
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6668' GL		10. FIELD AND POOL, OR WILDCAT Blanco MV & Basin Dakota
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T-29- N, R-7-W N. M. P. M.
		12. COUNTY OR PARISH Rio Arriba
		13. STATE N. M.

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 checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)\*

An application has been submitted to complete this well in the Mesa Verde formation. It is now planned to drill this well as a dual completion in the Mesa Verde - Dakota formations. , using the casing program below:

Proposed Casing & Cementing Program

Hole Size	Csg. Size	Wt./Ft.	Setting Depth	Quantity of Cement
15"	13 3/8"	40.0#	200'	100 cu.ft.to circulate
12 1/4"	9 5/8"	40.0#	3810'	635 cu.ft.cover Ojo Alamo
8 3/4"	7"	23.0#	3660-6208'	651 cu.ft.circ. liner
6 1/4"	4 1/2"	11.6#	6058-7960'	332 cu.ft.circ. liner

RECEIVED

APR 11 1979

U. S. GEOLOGICAL SURVEY  
DURANGO, COLO.

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

SIGNED

*N. J. Buices*

TITLE

Drilling Clerk

DATE 3-22-79

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

DURANGO OFFICE COPY

APR 03 1979

\*See Instructions on Reverse Side

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DURANGO, COLO.

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