Form: 3160-5 UNITED STA	ATES SUBMIT IN TRIPLICATE HE INTERIOR verse side)	E* Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO.
BUREAU OF LAND MANAGEMENT		SF 078425 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND I (Do not use this form for proposals to drill or to use "APPLICATION FOR PERM	REPORTS ON WELLS deepen or plug back to a different reservoir, IT—" for such proposals.)	
ī.		7. UNIT AGREEMENT NAME
OIL GAS WELL OTHER 2. NAME OF OPERATOR		San Juan 29-7 Unit
El Paso Natural Gas Company		San Juan 29-7 Unit
3. ADDRESS OF OPERATOR		9. WELL NO.
PO Box 4289, Farmington, NM Location of Well (Report location clearly and in accordance)	87499	70E
See also space 17 below.)		Basin Dakota
At surface 1040'S, 1100'W	MAS 03 HES	11. SEC., T., R., M., OR BLE. AND SURVEY OR ARMA
	BUREAU OF LAND AND AREMANT	Sec. 35, T-29-N, R-7-N NMPM
14. PERMIT NO. 15. ELEVATIONS	Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	6606'GL	Rio Arriba N.M.
• •	To Indicate Nature of Notice, Report, or	Other Data
NOTICE OF INTENTION TO:	SUBSI	EQUENT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CAS	SING WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT MULTIPLE COMPLET		X ALTERING CASING
SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS	SHOOTING OR ACIDIZING	ABANDON MENT*
REPAIR WELL CHANGE PLANS (Other)	(Other) (Note: Report resu	lts of multiple completion on Well apletion Report and Log form.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly s proposed work. If well is directionally drilled, give nent to this work.)	tate all pertinent details, and give pertinent dat	es, including estimated date of starting any
Tested casing Perforated 755 7608', 7612', 7726', 7729', with 1 sp7	on 4 1/2" at 3000' by ce to 4000#, ok. PBTD 776754', 7590', 7593', 7596', 7622', 7693', 7697', 776732', 7738', 7740', 774	7'. , 7599', 7601', 02', 7706', 41', 7766', 7769' 40 sand and
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18. I hereby certify that the taregoing is true and correct	Drilling Cle	rk March 8, 1985
SIGNED 1994 OTHER	TITLE	EPTED FOR RECORD
(This space for Federal or State office use)		
CONDITIONS OF APPROVAL, IF ANY:	TITLE	MAR 21 1985
	<u>BCGC 990</u> FARW	MINGTON NESSONGE AKÉA

*See Instructions on Reverse Side RY ________