

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 29-7 Unit

8. FARM OR LEASE NAME

San Juan 29-7 Unit

9. WELL NO.

142

10. FIELD AND POOL, OR WILDCAT

Ballard Pic. Cliffs

11. SEC., T., S., M., OR BLK. AND

SURVEY OR AREA
Sec. 25, T-29-N, R- 7-W
N.M., P.M.

12. COUNTY OR PARISH 13. STATE

Rio Arriba NM

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 ☒

2. NAME OF OPERATOR
El Paso Natural Gas Company

3. ADDRESS OF OPERATOR
Post Office Box 4289, Farmington, NM 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface 1680'S, 1500'E

14. PERMIT NO.

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

6725' GL

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)

Run Casing

(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.)*

10-15-88 Ran 89 jts. 4 1/2", 10.5#, K-55 production casing, 3655' set @ 3669'. Self-fill insert set @ 3662'. Cemented with 240 sks. Class "B" 65/35 Poz with 6% gel, 2% calcium chloride and 1/2 cu.ft. perlite (473 cu.ft.) followed by 100 sks. Class "B" with 2% calcium chloride (118 cu.ft.) WOC 18 hours.

RECEIVED
OCT 19 PM 3:41
FARMINGTON, NEW MEXICO

DO NOT SIGN
OIL CON. DIST. 2

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

SIGNED

TITLE Regulatory Affairs

DATE

10-19-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMCCC

*See Instructions on Reverse Side

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