TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE X SHOOT OR ACIDIZZ REPAIR WELL CHANGE PLANS WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING	SF 078415A 6. IF INDIAN, ALLOTTEE OR TRISE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME ROELOFS A 9. WBLL NO.		
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NAME OF OPERATOR E1 Paso Natural Gas Company ADDRESS OF OPERATOR BURLAU OF LAND MANAGEMENT FARMINGTON OF MELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 800'N, 1700'W 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6319'GL Check Appropriate Box To Indicate Nature of Notice, Report, or Company TEST WATER SHUT-OFF FRACTURE TREAT NULLIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING (Other) LDESS (RIBE PROPONED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent gates, proposed work. If well is directionally drilled, give subsurface beations and measured and true vertice to this work.)* It is intended to dually complete this well by I tubing and setting a drillable bridge plug above	8. FARM OR LEASE NAME ROElofs A		
EI Paso Natural Gas Company ADDRESS OF OPERATOR EARMINGTON FARMINGTON FARMINGTON FARMINGTON FARMINGTON FOR BOX 4289, Farmington, NM 87499 LOCATION OF WELL (Report location clearly and is accordance with any State requirements.* See also space 17 below.) At surface 800'N, 1700'W Check Appropriate Box To Indicate Nature of Notice, Report, or Company NOTICE OF INTENTION TO: SUBBIQ TEST WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING MATER SHUT-OFF FRACTURE TREATMENT SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING LESS FRIDE PROPOSED OR COMPLETED OWERATIONS (Clearly state all pertinent details, and give pertinent dates proposed work.) Well is directionally drilled, give subsurface locations and measured and true vertice nent to this work.)* It is intended to dually complete this well by I tubing and setting a drillable bridge plug above	Roelofs A		
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Check Appropriate Box To Indicate Nature of Notice, Report, or Constitution to: **Subsequence of Intention to:** **Test water shut-off** **Fracture treat** **Shoot or acidizz** **Repair well change plans** **Gother** **Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, proposed work. If well is directionally drilled, give subsurface locations and measured and true vertice near to this work.)** It is intended to dually complete this well by a tubing and setting a drillable bridge plug above.	12. COUNTY OF PARISH 13. STATE		
Check Appropriate Box To Indicate Nature of Notice, Report, or Constitution to: **Subsequence of Intention to:** **Test water shut-off** **Fracture treat** **Shoot or acidizz** **Repair well change plans** **Gother** **Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, proposed work. If well is directionally drilled, give subsurface locations and measured and true vertice near to this work.)** It is intended to dually complete this well by a tubing and setting a drillable bridge plug above.	San Juan NM		
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tubing and setting a drillable bridge plug above	including estimated date of starting any aid depths for all markers and zones perti-		
and the Pictured Cliffs formation selectively peand sandwater fractured. Following clean out, on strings will be run and the producing formations with a production packer.	e the Mesa to 3500 psi, erforated dual tubing		
Attached is a well location plat showing the dec the Pictured Cliffs formation.	dication of		
	RIAED		
API	R 1 7 1985		
OIT C	ON. DIV.		
before vertice that the foregoing is true and correct			
Title state for Federal or State office use)	DATE <u>April 12, 1985</u>		

FARMMOTON RUSOURCE AREA

TITLE _

ATTROUGH BY ______ CONSTITUTES OF APPROVAL, IF ANY:

Consular	All dista	nces must be from	the outer boundaries	s of the Section	n	·		
	NATURAL GAS CO	MPANY	ROELOFS A	A (SF	r-078415-A)	Well No. 1A		
Unit Letter Secti	10	29-N	Range 8-W	County	SAN JUAN			
Actual Footage Location of 800	of Well: from the NORTH	line and	1700	<u>_</u>	WEST			
Ground Level Elev. 6319	Producing Fermation Pic MESA VERD	tured Per	n Lancu	Pictur	ed CliffSedic	line ated Acresie: 160.0&		
1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.								
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).								
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling.etc?								
Yes No If answer is "yes;" type of consolidation <u>Communitization</u>								
If answer is "n this form if nece	o;' list the owners and	d tract descript	ions which have	actually be	en consolidated. (Use reverse side of		
No allowable wi	ll be assigned to the w	ell until all int	erests have bee	n consolida	ted (by communiti	zation, unitization		
forced-pooling, o	or otherwise) or until a	non-standard un	it, eliminating s	such interes	ts, has been appro	ved by the Commis-		
	Comment of the second	<u> </u>			CER	TIELCATION		
		Note: Pla reissued t	o i		CER	TIFICATION		
	$\frac{1}{2}$	show addit of PC Form		į	•	that the information con- true and complete to the		
1700'	-0	4-11-85	1		t	leage and belief.		
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					Drilling (Clerk		
			1		El Paso N	atural Gas Co.		
SF-078	3415-A		i		Company April 12	, 1985		
	SECT) N 10	į		Date			
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