| Form 9-331 (May 1963) | UNITED STATES SUBMIT IN TRIPLIC (Other Instructions of THE INTERIOR verse side) | |
|--|--|---|
| | GEOLOGICAL SURVEY | NM 0560422 |
| S (Do not use | UNDRY NOTICES AND REPORTS ON WELLS this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.) | 6. IF INDIAN, ALLETTEE OR TRIBE NAME |
| ī. | | 7. UNIT AGREEMENT NAME |
| OIL GAS | | 8. FARM OR LEASE NAME |
| 2. NAME OF OPERAT | | El Paso |
| El Paso Nat | ural Gas Company | 9. WELL NO. |
| | Farmington, NM 87401 L. (Report location clearly and in accordance with any State requirements.* | 2 10. FIELD AND POOL, OR WILDCAT Aztec P C 11. Sec., T., M., OR BLK. AND SURVEY OR AREA Sec., 20, T-29-N, R-9-W |
| | | NMPM |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, CR, etc.) | 12. COUNTY OR PARISH 13. STATE |
| | 5707'GL | San Juan New Mexico |
| 16. | Check Appropriate Box To Indicate Nature of Notice, Repor | t, or Other Data |
| | NOTICE OF INTENTION TO: | SUBSEQUENT REPORT OF: |
| FRACTURE TREA SHOOT OR ACIDI REPAIR WELL (Other) 17. DESCRIBE PROPOSE proposed wor nent to this w | T MULTIPLE COMPLETE FRACTURE TREATMEN ABANDON* CHANGE PLANS (Other) (Note: Report Completion or SED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent k. If well is directionally drilled, give subsurface locations and measured and true | results of multiple completion on Well Recompletion Report and Log form.) |
| 6-28-72 | T.D. 2199'. Ran 71 joints 2 7/8", 6.4#, J-55 pr 2199'. Baffle set at 2189'. Cemented with 386 cr top of cement at 925'. | oduction casing, 2187' set at u.ft. cement. WOC 18 hours, |
| 8-2-72 | PBTD 2189'. Perf'd 2102-2112' and 2126-2142' with 30,000# 10/20 sand and 30,170 gallons treat 30 balls. Flushed with 550 gallons. | rith 30 shots per zone. Frac'd red water. Dropped one set of |
| | | |
| • | AUG 8 1972 OIL CON. COM. | AUG 7 1372 |

 $V_{\mathcal{G}}$

Form 9-331 (May 1963)

THE INTERIOR (Other instructions on re-UNITED STATES

Form approved. Budget Bureau No. 42-RA424.

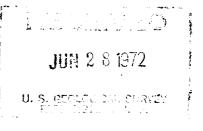
| DEPAR | NM 05 | 560422 | | | | |
|---|------------------------------|-----------------------------|-----------------------------------|-----------------------------------|------------------|--|
| SUNDRY NC | G. IF IND | IAN, ALLOTTEE | OR TRIME NAME | | | |
| OIL GAS WELL OTHER | | | 7. UNIT A | GREEMENT NAM | IE . | |
| 2. NAME OF OPERATOR | | | 8. FARM | 8. FARM OR LEASE NAME | | |
| El Paso Natural Gas | Company | | El Pa | El Paso | | |
| 3. ADDRESS OF OPERATOR | | | 9. WELL | 9. WELL NO. | | |
| PO Box 990. Farming | rton, NM 87401 | | 2 | 2 | | |
| PO Box 990, Farmington, NM 87401 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | | | Aztec Pictured Cliffs Ext. | | |
| 850'S, 1180'W | ф. | | Sec. NMPN | evey of area 20, T-29-1 1 | N, R-9-W | |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether | DF, RT, GR, etc.) | 12. COUN | TY OR PARISH | 13. STATE | |
| • | 5707'GL | | San Ju | ıan | <u>New Mexic</u> | |
| 16. Check | Appropriate Box To Indicate | Nature of Notice, Report, o | | | | |
| NOTICE OF INTENTION TO: | | | SEQUENT REPOR | T OF: | | |
| TEST WATER SHUT-OFF | PULL OR ALTER CASING | WATER SHUT-OFF | X | REPAIRING W | ELL | |
| FRACTURE TREAT | MULTIPLE COMPLETE | FRACTURE TREATMENT | | ALTERING CA | SING | |
| SHOOT OR ACIDIZE | ABANDON* | SHOOTING OR ACIDIZING | | ABANDONMEN | т* | |
| REPAIR WELL (Other) | CHANGE PLANS | (Other) | ults of multipl empletion Repo | e completion of rt and Log for | on Well m.) | |

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.)*

6-26-72

Spud well. Drilled surface hole. Ran4 joints 8 5/8", 24#, K-55 surface casing, 128' set at 141'. Cemented with 107 cu.ft. cement, circulated to surface. WOC 12 hours, held 600 %/30 minutes.





| 18. I hereby certify that the foregoing is true and correct SIGNED 77 | | DATE June 28, 1972 |
|---|-------|--------------------|
| (This space for Federal or State office use) | | |
| APPROVED BY | TITLE | DATE |

EL PASO NATURAL GAS COMPANY

DEVIATION REPORT

| Name Of | Company El Paso Natural Gas Comp any | | Add | ress | PO Box 990, | Farmington, NM 87401 | |
|---------|---|----------|-------------|-----------|-----------------|----------------------|--|
| Leose | El Paso | Well No. | Unit Letter | r Section | Township 29N | Rang e 9W | |
| Di Tuso | | County | San Juan | | | | |

| DEPTH | DEVIATION |
|-------|-----------|
| 143° | 3/4° |
| 620° | 3/4° |
| 1120' | 3/4° |
| 1620' | 1° |
| 2106' | 1° |



I, the undersigned, certify that I, acting in my capacity as Petroleum Engineer of El Paso Natural Gas Company, am authorized by said Company to make this report; and that this report was prepared by me or under my supervision and directions and that the facts stated therein are true to the best of my knowledge and belief.

Subscribed and sworn to before me this 28th day of August ,172

Notary Public in and for San Juan County, New Mexico