AT TOTAL DEPTH:

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)

Form Approved. Budget Bureau No. 42-R1424

New Mexico

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

AT SURFACE: 500'N, 1840'W AT TOP PROD. INTERVAL:

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME	
1. oil gas X other	EL PASO 9. WELL NO.	
2. NAME OF OPERATOR EL PASO NATURAL GAS CO.	1A 10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR BOX 990, FARMINGTON, NEW MEXICO	BLANCO MESA VERDE 11. SEC., T., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 500'N, 1840'W	AREA Sec. 20, T-29-N, R-9-W NMPM 12. COUNTY OR PARISH 13. STATE	

San Juan

14. API NO.

5. LEASE

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

SUBSEQUENT	REPORT	OF:
X		
H		
. 📙		
1 1		

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

15. ELEVATIONS (SHOW DF, KDB, AND WD)

5559' GL

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.)*

Spudded well. Drilled surface hole. 1/5/78:

Ran 5 joints 9 5/8", 32.3#, H-40 surface casing, 227' set at 242'. 1/6/78: Cemented with 525 cu. ft. cement. Circulated to surface.

12 hours; held 600#/30 minutes.



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

Subsurface Safety Valve: Manu. and Type ____

TITLE Drilling Clerk DATE

_ TITLE .

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

_ DATE

RECEIVED