Form 9-331 (Mny 1963)

SHOOT OR ACIDIZE

REPAIR WELL

## UNITED STATES DEPARTMENT OF THE INTERIOR (Other instructions on reverse side) GEOLOGICAL SURVEY

ABANDON\*

Present Status

CHANGE PLANS

SUBMIT IN TRIPLICATE\*

SHOOTING OR ACIDIZING

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SF 079484-A

ABANDONMENT\*

INIDDA	NOTICES	A ND	DEDODIC	ON	\A/ET	l C

	(Do not use this form for proposals to drill or to deepen or pluse "APPLICATION FOR PERMIT—" for suc	ug back to a different reservoir.			
	OIL GAS WELL WELL OTHER		7. UNIT AGREEMENT NA San Juan	ME 30-4 Unit	
2.	NAME OF OPERATOR	8. FARM OR LEASE NAME			
	El Paso Natural Gas Company		San Juan	30-4 Unit	
3. ADDRESS OF OPERATOR			9. WELL NO.		
	PO Box 990, Farmington, NM 8740	1	16		
4.	LOCATION OF WELL (Report location clearly and in accordance with a See also space 17 below.)	10. FIELD AND POOL, OF	WILDCAT		
	At surface 890'S, 890'W		East Blanco PC		
			11. SEC., T., R., M., OR B SURVEY OR AREA Sec. 10, T-30 NMPM	LK. AND	
<u>14.</u>	ERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH	13. STATE	
	7384'DF		Rio Arriba	NM	
16.	Check Appropriate Box To Indicate	Nature of Notice, Report, or	Other Data		
	NOTICE OF INTENTION TO:	SEQUENT REPORT OF:			
	TEST WATER SHUT-OFF PULL OR ALTER CASING RACTURE TREAT MULTIPLE COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT	REPAIRING W	i—-	

(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.) \*

Permission is requested to classify this well as temporarily abandoned. The well is presently being evaluated. Periodic visits will be made to the wellsite to check the bradenhead and surface equipment to insure the well stays in good condition.

TEMPORARY WARDUNGENT EXPIRES\_



18. I hereby certify that the foregoing is true and correct SIGNED	Sr.Drilling Engi	neer <sub>DATE</sub> 9-2-76
(This space for Federal or State office use)		
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE