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

	5. LEASE NM 012709
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
лt	7. UNIT AGREEMENT NAME San Juan 30-6 Unit
	8. FARM OR LEASE NAME San Juan 30-6 Unit
	9. WELL NO. 9A
	10. FIELD OR WILDCAT NAME Blanco MV
7	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T-30-N, R-7-W N.M.P.M.
	12. COUNTY OR PARISH Rio Arriba New Mexico
ı	14 API NO

CUMPRY MOTIOCO AND DEPOSE	
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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME San Juan 30-6 Unit
1. oil gas X	8. FARM OR LEASE NAME San Juan 30-6 Unit
2. NAME OF OPERATOR	9. WELL NO. 9A
El Paso Natural Gas Company 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Blanco MV
Box 289, Farmington, New Mexico 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 54518 51018	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T-30-N, R-7-W N.M.P.M.
AT SURFACE: 545'S, 510'E AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH Rio Arriba New Mexico
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO.
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6289 G.L.
TEST WATER SHUT-OFF	
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
ABANDON*	
 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is di measured and true vertical depths for all markers and zones pertinent 1-79: PBTD 5769¹. Tested casing to 3500#, OK. Perf 5378 5384 5390 5396 5402 5408 5414 5430 5436 	t to this work.)*
5378,5384,5390,5396,5402,5408,5414,5420,5426,5593,5603,5613,5622,5645,5672,5712,5743' W/1 169,000 gal. water. Flushed w/7690 gal. water	SPZ. Fraced w/84 500# 20/40 cand
-79: Perfed C.H. & Men. 4799,4829,4831,4837,4843, 5010,5024,5070,5098,5117,5124,5162,5222,5236' sand, 114,000 gal. water. Flushed w/6910 gal	W/1 SPZ Fraced $W/57$ 000# 20/40
	AUG Pion
Subsurface Safety Valve: Manu. and Type	Set @ OIL CON TOX
18. I hereby certify that the foregoing is true and correct	DIST, 3
SIGNED MANA STREET Drilling Cler	DATE
(This space for Federal or State office	e use)
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE

*See Instructions on Reverse Side