tie.

UNITED STATES DEPARTMENT OF THE INTERIOR

UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	SF 079383
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME San Juan 30-6 Unit
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.)	8. FARM OR LEASE NAME
eservoir. Use Total 5 UST Cital Securption	San Juan 30-6 Unit
1. oil gas X other	9. WELL NO.
2. NAME OF OPERATOR	99A % % % % % % % % % % % % % % % % % %
EL PASO NATURAL GAS. COMPANY	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Blanco MV
P.O.BOX 289, FARMINGTON, NEW MEXICO 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34, T-30-N, R-7-W,
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	N.M.P.M.
below.) AT SURFACE: 1710'N, 1590'W	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Rio Arriba New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6292' G.L.
TEST WATER SHUT-OFF	
FRACTURE TREAT	ធិន្ទីម៉ូ ៩ ខ្ញុំឡូញ៉
SHOOT OR ACIDIZE	
REPAIR WELL ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
MULTIPLE COMPLETE	원 - 회원회원 - 및 독급장점 - 병 -
CHANGE ZONES	
ABANDON*	그 그는 본 그 회회한 학교 의 회원생활. 위
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is d	Rectionally dillied. Sive appartiace locations and
measured and true vertical depths for all markers and zones pertiner	nt to this work.)*
70 20# VS in	ntermediate casing 35121-
5-08-79: TD 3523'. Ran 85 jts. 7", 20#, KS in set at 3523'. Cemented w/304 cu.ft. cement.	WOC 12 hrs. held 1200#/30 min.
Top of cement 2600'.	
•	그 그 그 그 사람들은 이 사는 유리를 받는 것이다.
5-12-79: TD 5790'. Ran 75 jts. 4 1/2", 10.5#	, K-55 casing liner, 2431' set
3359-5790'. Float collar set at 5772'. Cement	ted w/423 cu.ft. cement
WOC 18 hrs.	
•	
	↑ 00 \$36 6 5 1 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Subsurface Safety Valve: Manu. and Type	Set @
18. I hereby certify that the foregoing is true and correct	(*) 설명 현대의 경 본 (*) (주현 (*) (소급 현무한 기사숙 (*) 등 등 최고
My Kriger Desilling Cl	erk DATE _ 5-31-79
(This space for Federal or State of	Tice use)
APPROVED BY TITLE	DATE ESTATE OF THE PARTY OF THE
CONDITIONS OF APPROVAL, IF ANY:	
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