

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

**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 "APPLICATION FOR PERMIT—" for such proposals.)

<b>1. OIL WELL</b> <input type="checkbox"/> <b>GAS WELL</b> <input checked="" type="checkbox"/> <b>OTHER</b> <input type="checkbox"/> <b>2. NAME OF OPERATOR</b> El Paso Natural Gas Company <b>3. ADDRESS OF OPERATOR</b> Post Office Box 4289, Farmington, NM 87499 <b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1807'S 1780'W <b>14. PERMIT NO.</b>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b> SF-079383 <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>  <b>7. UNIT AGREEMENT NAME</b> San Juan 30-6 Unit <b>8. FARM OR LEASE NAME</b> San Juan 30-6 Unit <b>9. WELL NO.</b> 414 <b>10. FIELD AND POOL, OR WILDCAT</b> Undes. Fruitland <b>11. SEC., T., R., M., OR B.L.K. AND SURVEY OR AREA</b> Sec. 35, T-30-N, R-7-W N.M.P.M. <b>12. COUNTY OR PARISH</b> <b>13. STATE</b> Rio Arriba NM
<b>15. ELEVATIONS (Show whether OF, ST, OR, etc.)</b> 6847'GL		

**16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDISE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Running Casing</u> <input type="checkbox"/>	

\*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.)\*

8-20-87 TD 3590'. Ran 87 jts. 7", 20.0#, K-55 casing 3582' set @ 3595'. Cemented 1st stage w/360 sks. Class "B", 65/35 POZ mix, 6% gel, 1/4# cu ft Perlite/sk (695 cu.ft.). 2nd stage cmt'd w/100 sks class "B", 2% calcium chloride (118 cu ft). WOC 12 hours. Held 1200#/30 minutes. Top of cement @ 1050'.

RECEIVED  
 PLANNING ROOM  
 87 AUG 24 PM 12:49  
 FARMINGTON RESOURCE AREA  
 FARMINGTON, NEW MEXICO

RECEIVED  
 SEP 09 1987  
 OIL CON. DIV.  
 DIST. 3

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

SIGNED [Signature] TITLE Drilling Clerk DATE 8-21-87

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE SEP 03 1987

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA  
 BY SMW