Form 3160—5 (November 1923) (Formerly 9—331)	UNITED DEPARTMENT	D STATES OF THE INTE	SUBMIT IN TRIP (Other Instruction RIOR verse alde)		Budget Bureau No. 1004-9135 Expires August 31, 1985 LASS SESSENATION AND SOCIAL NO.
, , , , , , , , , , , , , , , , , , , ,		ND MANAGEME		SF	-079382
SUNE	ORY NOTICES A	ND REPORTS	ON WELLS g back to a different reserved	· · ·	INDIAN, ALLOTTER OR TRIDE HAME
	OH APPLICATION TO	PERMIT IN THE	, 107-112)	1	
OFE GAS X] •****				n Juan 30-6 Unit
. HAME OF OFERATOR					ST OF LEVER NAME
E	l Paso Natura	al Gas Comp	any		n Juan 30-6 Unit
ADDRESS OF OFERATOR				9/11	ML SO.
P	ost Office Bo	x 4289,Far	mington,NM 8749	99 / 4:	16
See also space 17 beign	port location clearly and	accordance with a	ny State requirements."	10. 9	THE AND POOL, OR WILDCAT
At surface	450's, 1450'w	7			des.Fruitland
				11. •	SURVEY OR AREA
					c.24,T-30-N,R- 7-V
1 -22	18 8190	TIONS Show whether	AP 25 (20 ma)	1 .	M.P.M.
4. PERMIT NO.	13. •624		10 'GL		OGSTT OR PARISE 13. STATE
			10 GD	RIC	o Arriba NM
8.	Check Appropriate	Box To Indicate	Nature of Notice, Repa	nt, or Other [Data
NO	TICE OF INTENTION TO:			803639 0337 83	POGT OF:
TEST WATER SEUT-OFF	PCLL OR ALT	ER CISING	Water sectors		REPAIRING WOLL
FRACTURE TREAT	Anribre Co	BTR.ITE	PRACTURE TREATMEN	12	ALTERING CASING
SELCIDA SO TOORS	ABANDON*		SECOTING OR ACIDIE	1346	ÝSTHOON MERS.
REPAIR WELL	CHANGE PLA	78	(Other)		
(Other)			Completion or	Recompletion L	tiple completion on Wall pport and Log form.) Ag estimated date of starting any of for all markers and some perti-
12 1/4 20 8:3/4 3 6:1/4 3 6:1/4 3 7	Csg. Size 9 5/8" 7" 5 1/2"	200' 3000' 3100'	Weight 32.3# 20.0# 23.0#	256 cf do not	f circ. f cover Ojo Alamo t cmt
I hereby certify that the SIGNED LEGICAL (This space for Federal	Lorali	orrectTITLE Dr	illing Clerk	DIE G	11-03-87
APPROVED BY		TITLE		r	APPROVED NOV 0 3 1982
ch!	r	*See Instruction	s on Revene Side	• .	AREA MANAGER

*See Instructions on Revene Side

AREA MANAGE

Title 13 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

OPERATIONS PLAN

Well Name - SAN JUAN 30-6 Unit #416

Date: 02-Nov-87

I.Location: 1450'FSL, 1450'FWL, Sec.24, T-30-N, R-7-W, RIO ARRIBA CO., NEW M

Field: Undesignated Fruitland Elevation: 6210'

II. Geology:

A.	Formation	Tops: Surface	San Jose	Fruitland Top	3020
		Ojo Alamo	2150	Fruitland Base	3100
		Kirtland	2365	Total Depth	3100
		Fruitland Sand	2860	-	

B. Logging Program: Total Depth Logs: GR-N, I-ES, GR-D

C. Coring: None

III.Drilling:

A: Mud Program: Mud from surface to Total Depth.

IV. Materials:

A.	Casing Progra	m: Hole Size	Depth Csg. Size	Weight	Grade
		12 1/4"	200 9 5/8"	32.3#	H-40
		8 3/4"	3000 7"	20.0#	K-55
		6 1/4"	3100 5 1/2"	23.0#	P-110

B. Float Equipment: 9 5/8" surface casing - Saw Tooth guide shoe.

7" intermediate casing - guide shoe and self-fill insert float valve. Five centralizers run every other joint above shoe. Run float two joints above the guide shoe.

- 5 1/2" production liner liner hanger with double grip packoff.
 Bull nose guide shoe on bottom. Liner pre-drilled with 12 holes/ft.
- C. Tubing: 3100 of 2 3/8", 4.7#, J-55 8rd EUE tubing with a seating nipple one joint off bottom and expendable check valve on bottom.
- D. Wellhead Equipment: 9 5/8" x 10" 2000 psi xmas tree assembly.

V. Cementing:

9 5/8" surface casing-use 106 sks. of Class B cement with 1/4# gel-flake/sk. and 3% calcium chloride (125 cu.ft. of slurry, 100% exces to circulate to surface). WOC 12 hours. Test casing to 600 psi for 30 minutes.

7" intermediate casing-use 72 sks. of 65/35 Class "B" Poz with 6% gel, 2% calcium chloride and 1/2 cu.ft. Perlite/sk. (10.3 gallons of water/sk.) followed by 100 sks. of Class B with 2% calcium chloride (256 cu.ft. of slurry, 100% excess to cover Ojo Alamo). Run temperature survey at 8 hours. WOC 12 hours. Test casing to 1200 psi for 30 minutes.

5 1/2" liner - Do not cement.