

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME San Juan 30-6 Unit
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME San Juan 30-6 Unit
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499		9. WELL NO. 456
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 565'N, 735'E		10. FIELD AND POOL, OR WILDCAT Undes. Fruitland Coal
14. PERMIT NO.	15. ELEVATIONS (Show whether OF, BT, GR, etc.) 6371'GL	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18, T-30-N, R-06-W N.M.P.M.
		12. COUNTY OR PARISH 13. STATE Rio Arriba NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PELL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(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.)*

07-05-88 TD 3125'. Ran 73 jts. 7", 20.0#, K-55 intermediate casing, 3112' set @ 3125'. Cemented with 460 sks. Class "B" 65/35 Poz, with 6% gel, 2% calcium chloride and 1/2 cu.ft./sack perlite (888 cu.ft.) followed by 100 sks. Class "B" with 2% calcium chloride (115 cu.ft.). WOC 12 hours. Held 1200#/30 min. TC by TS @ 400'.

07-20-88 TD 3326'. Ran 7 jts. 5 1/2", 23.0#, P-110 casing liner, 300' set @ 3326'. Float shoe set @ 3326'. Top of liner hanger @ 3027'. Did not cement.

RECEIVED
OCT 11 1988
OIL CON. DIV
DIST. 3

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OCT 11 1988
OIL CON. DIV
DIST. 3

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

SIGNED [Signature]
(This space for Federal or State office use)

TITLE Regulatory Affairs

DATE 10-05-88

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

NEOCC

*See Instructions on Reverse Side