

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

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

<p>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.)</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. SF 078716-A</p>
<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p>		<p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p>
<p>2. NAME OF OPERATOR El Paso Natural Gas Company</p>		<p>7. UNIT AGREEMENT NAME</p>
<p>3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401</p>		<p>8. FARM OR LEASE NAME Hubbell</p>
<p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1050'S, 890'E</p>		<p>9. WELL NO. 7</p>
<p>14. PERMIT NO.</p>		<p>10. FIELD AND POOL, OR WILDCAT Aztec Pictured Cliffs</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5706'GL</p>		<p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T-29-N, R-10-W NMPM</p>
<p>12. COUNTY OR PARISH San Juan</p>		<p>13. STATE New Mexico</p>

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

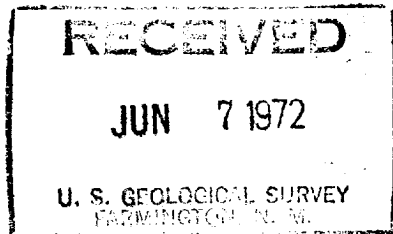
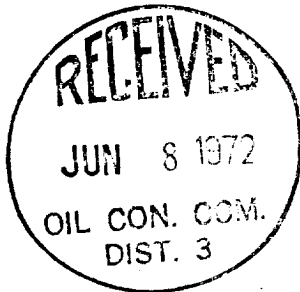
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <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) _____	

(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.)*

3-31-72 T.D. 2148'. Ran 68 joints 2 7/8", 6.4#, J-55 production casing, 2138' set at 2148'. Baffle set at 2137'. Cemented with 412 cu. ft. cement. WOC 18 hours, Top of cement at 825'.

6-2-72 PBTD 2137'. Perf'd 2038-54' with 32 holes and 2064-80' with 31 holes. Fraced with 30,000# 10/20 sand and 29,590 gallons treated water. Dropped one set of 32 balls. Flushed with 500 gallons water.



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

SIGNED *H. Wood* TITLE Petroleum Engineer DATE June 7, 1972

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: