

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

PERMIT IN TRIPLICATE
(Other Instructions on the
reverse side)

Form approved
Budget Project No. 42-51121

5. LEASE DESIGNATION AND SERIAL NO.

SF 078596

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME Howell C
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401		9. WELL NO. 6
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2510'S, 1270'W		10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliffs
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR APPL. Sec. 18, T-30-N, R-8-W NMPM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6328'GL		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

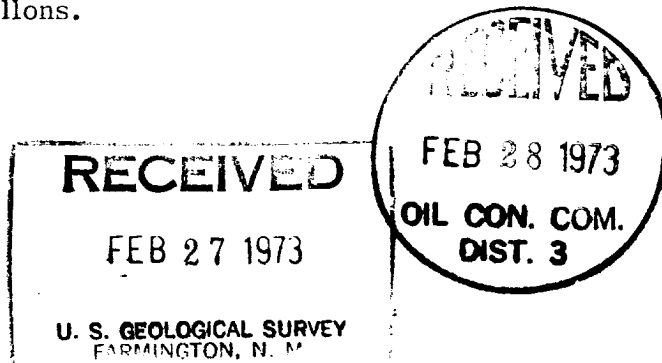
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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) <input type="checkbox"/>	
(Other) <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.)*

2-10-73 T.D. 3259'. Ran 103 joints 5 1/2", 15.5#, K-55 production casing, 3246' set at 3259'. Float Collar set at 3241'. Cement with 363 cu. ft. cement. WOC 18 hours. Top of cement at 1820'.

2-20-73 PBTD 3241'. Perf'd 3108-3120' and 3132-44' with 20 holes per zone. Frac'd with 30,000# 10/20 sand and 30,114 gallons treated water. Dropped one set of 22 balls. Flushed with 3360 gallons.



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

SIGNED

Handwritten signature

TITLE

Petroleum Engineer

DATE

February 23, 1973

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: