Form 9–331
Dec. 1973

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42–R1424

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 Form 9–331–C for such proposals.)

1.	oil well ☐	gas well ☒	other

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

Box 289, Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1630'N, 1760'W
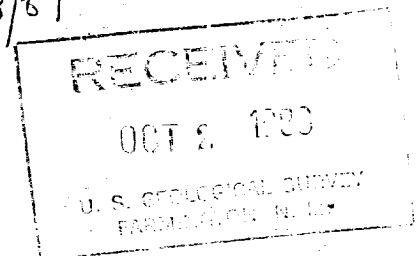AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
SF 078266

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Hubbell

9. WELL NO.
5-E

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T-29-N, R-10-W N.M.P.M.

12. COUNTY OR PARISH   13. STATE
San Juan   New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5698' GL

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐		☐
FRACTURE TREAT	☐		☐
SHOOT OR ACIDIZE	☐		☐
REPAIR WELL	☐		☐
PULL OR ALTER CASING	☐		☐
MULTIPLE COMPLETE	☐		☐
CHANGE ZONES	☐		☐
ABANDON*	☐		☐
(other) Extend Approval on Permit to Drill			

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.)*

It is anticipated that the "Permit to Drill" will expire before this well can be spudded; therefore, an extension is requested.
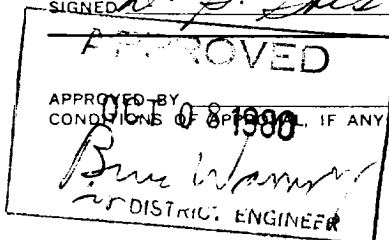
Approved to 7/3/81

RECEIVED
OCT 2 1980
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _____ TITLE Drilling Clerk _____ DATE October 2, 1980

(This space for Federal or State office use)

TITLE _____ DATE _____

APPROVED
APPROVED BY OCT 8 1980
CONDITIONS OF APPROVAL, IF ANY

DISTRICT ENGINEER

*See Instructions on Reverse Side
NMOCC