

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 078097

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Heaton

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Blanco Mesa Verde

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

SEC. 28, T-31-N, R-11-W

NMPM

12. COUNTY OR PARISH 13. STATE

San Juan New Mexico

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

PO Box 990, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

880'S, 1190'W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5872'GL

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)

PULL 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* ☐Suspected Casing Leak ☒

(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.)*

on 10-25-71, Pulled tubing.

on 10-26-71, Cleaned out to top of liner at 4472', set EZ Drill retainer at 4604', pumped hole full of water and tested casing to 1000#, held pressure 5 minutes-OK.

on 10-27-71, Drilled retainer at 4604' and cleaned out to 4875'.

on 10-28-71, Ren-ran 160 joints 2 3/8", 4.7#, J-55 tubing 4758' landed at 4771' with common pump seating nipple on bottom.

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

SIGNED Original Signed F. H. WoodTITLE Petroleum EngineerDATE November 2, 1971

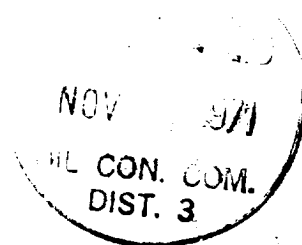
(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side



RECEIVED

NOV 2 1971

U. S. GEOLOGICAL SURVEY