

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved
Budget Order No. 42 H1424

5. LEASE DESIGNATION AND SERIAL NO.

NM 0607

6. IF INDIAN, ALGONQUIN, OR TRIBAL NAME

7. UNIT ACQUISITION NAME

8. FARM OR LEASE NAME

Atlantic C

9. WELL NO.

10

10. FIELD AND POOL OR VULCANAT

Blanco Pictured Cliffs Ext.

11. SURV. T. & M. OR NE. AND
SERIES OR AREA

Sec. 35, T-31-N, R-10-W
NMNM

12. COUNTY OR PARISH

San Juan

13. STATE
New Mexico

1. OIL ☐ GAS ☒ OTHER ☐
WELL ☐ WELL ☒

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

PO Box 990, Farmington, NM 87401

4. POINT OF WELL (Show location on clearly and in accordance with any State requirements.*

See space 17 below
At surface

900'S, 1620'E

14. PERMIT NO.

15. ELEVATIONS (Show whether DE, ST, OR, etc.)

6497'GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FEATHER TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

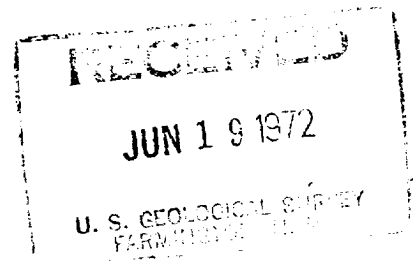
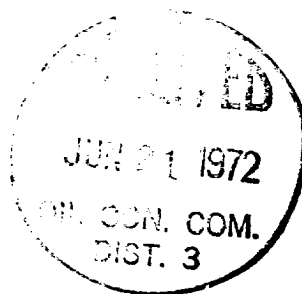
ABANDONMENT*

(Note: Report results of multiple completion or Well Completion or Re-completion Report and Log form.)

17. DISCOVER PROPOSAL OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent data, 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.)*

6-13-72

Spud well. Drilled surface hole. Ran 4 joints 8 5/8", 24#, J-55 surface casing, 130' set at 142'. Cemented with 166 cu. ft. cement. Circulated to surface. WOC 12 hours, held 600#/30 minutes.



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

SIGNED

H. Wood

TITLE Petroleum Engineer

DATE June 14, 1972

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE