

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 12013	
2. NAME OF OPERATOR El Paso Natural Gas Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, New Mexico 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790'S, 2200'E		8. FARM OR LEASE NAME EPNG A	
14. PERMIT NO.		9. WELL NO. 1(OWWO)	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6420' Gr		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR ABEA Sec. 21, T-32-N, R-6-W N.M.P.M.	
		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:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Plug back to Mesa Verde & Comp <input checked="" 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.)*

This well was plugged back to the Mesa Verde formation and completed 11-29 through 12-4-77.

Cut off 2 7/8" casing at 6415'. Pressure tested 4 1/2" casing to 4000#, held O.K. Set EZ retainer at 6415' and squeezed with 100 sacks cement. Maximum displacement. Shot 2 squeeze holes at 6150'. Set RTTS packer at 5903'. Squeezed with 170 sacks cement. W.O.C. Ran cement bond log. Pressure tested 4 1/2" to 4000#, O.K.

P.B.T.D. 6415'. Perfed Cliff House and Menefee 5367, 5375, 5392, 5398, 5403, 5408, 5431, 5439, 5546, 5556, 5576' with 1 SPZ. Fraced with 76,000# 20/40 sand and 77,350 gallons water. Flushed with 3590 gallons water.
Perfed Point Lookout 5630, 5638, 5646, 5693, 5703, 5745, 5755, 5764, 5773, 5782, 5801, 5857, 5901, 5911, 5938, 5955' with 1 SPZ. Fraced with 156,000# 20/40 sand and 157,100 gallons water. Flushed with 5000 gallons water.

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

SIGNED

TITLE Drilling Clerk

DATE 12-28-77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side