UNITED STATES SUBMIT IN TRIPLICATE* Other Instructions on reverse side) Form approved. Budget Bureau No. 42-R1424. 5. Lease Designation and Serial No.

GEOLOGICAL SURVEY	NM 03189
SUNDRY NOTICES AND REPORTS ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(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 GAS WELL OTHER	7. UNIT AGREEMENT NAME COX Canyon Unit 8. FARM OR LEASE NAME
El Paso Natural Gas Company	Cox Canyon Unit
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1500'N, 900'E OIL CON. COM. DIST. 3	Undes. Pictured Cliffs 11. SEC., T., R., M., OR BLK. AND SUNVEY OR ABEA Sec. 21, T-32-N, R-11-W NMPM
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6542 GL	12. COUNTY OR PARISH 13. STATE San Juan NewMexico
16. Check Appropriate Box To Indicate Nature of Notice, Report, or O	
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS FULL OR ALTER CASING WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report results)	n casing, 3429'
	gallons treated
18. I hereby certify that the foregoing is true and correct SIGNED DICEO TITLE Drilling Clerk	May 11, 1973

SIGNED A. D. Duces	Drilling Clerk	DATE May 11, 1973
(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE