

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 078504

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 32-9 Unit

8. FARM OR LEASE NAME

San Juan 32-9 Unit

9. WELL NO.

80

10. FIELD AND POOL, OR WILDCAT

Undesignated Fruitland

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

Sec. 23, T-32-N, R-10-W
NMPM

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. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface 800'S, 850'W

14. PERMIT NO.

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

6976'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 ☐

Re-FRACTURE TREATMENT ☒

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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.)*

7-6-73 PBTB 3883'. Refrac'd with 7265# 20/40 sand and 22,820 gallons treated water.
Dropped one set of 20 balls.



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

SIGNED

A. J. Dices

TITLE Drilling Clerk

DATE July 17, 1973

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE