Form 9-331 (May 1963)

## UNITED STATES SUBMIT IN TRIPLICATE\* Other Instructions on re(Other Instructions on reverse side) Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

DATE \_\_

GEOLOGICAL SURVEY			SF 078504
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.)			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS WELL OTHER  2. NAME OF OPERATOR			7. UNIT AGREEMENT NAME San Juan 32-9 Unit 8. FARM OR LEASE NAME
El Paso Natural Gas	Company		San Juan 32-9 Unit
PO Box 990, Farming 4. Location of Well (Report location See also space 17 below.)	ston, NM 87401 n clearly and in accordance with any 800'S, 850'W	State requirements.*	80 10. FIELD AND POOL, OR WILDCAT Undes. Fruitland 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T-32-N, R-10-W NMPM
14. PERMIT NO.	15. ELEVATIONS (Show whether DI	F, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	6976'GL		San Juan   New Mexico
16. Check A	Appropriate Box To Indicate N		
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED of proposed work. If well is direct this work.)*  5-22-73 Spudded  5-24-73 Ran 4 journey	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS  DEFERATIONS (Clearly state all pertinentionally drilled, give subsurface local well. Drilled surface oints 8 5/8", 24#, K-55	WATER SHUT-OFF  FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other)  (Note: Report recompletion or Recompletion or Recompletions and measured and true volume of the completions are completely as a completely	REPAIRING WELL ALTERING CASING ABANDONMENT*  sults of multiple completion on Well ompletion Report and Log form.)  ates, including estimated date of starting any ertical depths for all markers and zones perti-
			RECEIVED MAY 2 9 1973 GEOLOGICAL SURVEY
18. I hereby certify that the foregoing	r is true and correct	Drill <b>ing Cl</b> erk	DATE May 29, 1973
(This space for Pederal or State of	office use)		

TITLE \_

APPROVED BY \_\_\_\_\_\_\_CONDITIONS OF APPROVAL, IF ANY: