Form 9-331 Dec. 1973 Form Approved. Budget Bureau No. 42-R1424

UNITED STATES	5. LEASE				
DEPARTMENT OF THE INTERIOR	I-22-IND-2772				
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Indian				
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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME				
1. oil gas	8. FARM OR LEASE NAME Ute				
well well other 2. NAME OF OPERATOR	9. WELL NO.				
El Paso Natural Gas Company	10. FIELD OR WILDCAT NAME				
3. ADDRESS OF OPERATOR	Barker Creek Paradox				
Box 4289, Farmington, New Mexico 874994289	11. SEC., T., R., M., OR BLK. AND SURVEY OR				
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec. 21, t-32-N, R-14-W N M.P.M.				
AT SURFACE: 2310'N, 2310'W	12. COUNTY OR PARISH 13. STATE				
AT TOP PROD. INTERVAL:	San Juan New Mexico				
AT TOTAL DEPTH:	14. API NO.				
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6637' GL				
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF SUBSEQUENT REPORTECEN	FN				
FRACTURE TREAT SHOOT OR ACIDIZE NOV 3 0	1982				
REPAIR WELL	(NOTE: Report results of multiple completion or zone				
PULL OR ALTER CASING AUTHOR COMPLETE	change on Form 0 330)				
CHANGE ZONES					
ABANDON*					
(other) Present Status					
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertinent	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and it to this work.)*				
This well was reviewed and is in mechanical cond					
possible zones:					
77	Est. Reserves (BCFG)				
<u>Depth</u> <u>Zone</u> 8320-55					
4840-55 Shinarump	1.92				
· · · · · · · · · · · · · · · · · · ·					
Due to present market conditions, the unavailable to handle additional sour gas, and the cost to above it is uneconomical to recomplete this well to leave this wellbore in its present shut in statement of the s	recomplete and test each zone liste lat this time. It is requested				
Subsurface Safety Valve: Manu. and Type	Set @				
18. I hereby certify that the foregoin is true and correct SIGNED	gr. DATE November 19, 1982				
APPROVED BY CONDITIONS OF APPROVAL, IF ANY: (This space for Federal or State off JOHN L. PR District Superior Superio	ICE USE) POISOF DATE #/30/82				

SHUT-IN WELL DATA SHEET

Leas	se	, Well N	o. <u>11</u> ,	SE ½	½ s	ec. 21	,	
Т.	32 , R	$\frac{14}{}$, County	San Jua	<u>n</u> , s	State	New Me	<u>xico</u> .	
Fc	ormation: Barker C	reek Para	adn x erval:	8430		to 848	8	
	Date of Completion					Me	CFPD	
2.	Date of Last Test:	(a) <u>n/a</u>	;	Shut-in	Pressur	re: <u>n</u>	<u>/a</u> _p:	sig;
	24 Hour Rate:	0	_BOPD; MCF	PD	n/a			
	Working Pressure	n/a	psig;	Water Vo	01	n/a	BWPD	
3.	Is well capable of Estimated current			^				•
	Estimated lift cos							

- 4. Reason for Not Producing and/or Reason Not to Plug and Abandon: (*)
 - *(If not capable of producing in paying quantities.) (b)

This well has high lifting costs to remove water and high transportation costs to dispose of the water. This well is being reviewed for possible recompletion in another productive zone or used as a water disposal well.

- 5. Date producer was shut-in and reason for shut-in status (c)
- May 1961. Nonproductive high salt water/gas ratio
 - 6. Additional information: (d)



MINERALS MANAGEMENT SEED DURANGO, CO



(See reverse side for instructions)