

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR

EL PASO NATURAL GAS COMPANY

3. ADDRESS OF OPERATOR

P.O. BOX 289, FARMINGTON, N.M. 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1640'S, 910'E

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

☒

FRACTURE TREAT ☐

☒

SHOOT OR ACIDIZE ☐

☐

REPAIR WELL ☐

☐

PULL OR ALTER CASING ☐

☐

MULTIPLE COMPLETE ☐

☐

CHANGE ZONES ☐

☐

ABANDON* ☐

☐

(other) ☐

☐

5. LEASE

SF 078147

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Moore

9. WELL NO.

4 A

10. FIELD OR WILDCAT NAME

Blanco MV

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T-32-N, R-12-W, N.M.P.M.

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) 6419' G.L.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

5-15-79: TD 3284'. Ran 89 jts. 7", 20#, K-55 intermediate casing, 3272' set at 3284'. Cemented w/539 cu.ft. cement. WOC 12 hrs, held 1200#/30 min. Top of cement 1400'.

5-18-79: TD 5654'. Ran 77 jts. 4 1/2", 10.5#, K-55 casing liner, 2510' set 3144-5654'. Float collar set at 5637'. Cemented w/439 cu.ft. cement. WOC 18 hrs.

Subsurface Safety Valve: Manu. and Type

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

SIGNED D. P. Susco TITLE Drilling Clerk DATE 5-31-79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC