

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved,
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 078885

6. IF INDIAN, ALLOTTEE OR TRAIL NAME

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.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER		7. UNIT AGREEMENT NAME Canyon Largo Unit
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME Canyon Largo Unit
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401		9. WELL NO. 225
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 800'S, 1180'W		10. FIELD AND POOL, OR WILDCAT So. Blanco Pictured Cliffs
14. PERMIT NO.		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 3, T-25-N, R-6-W NM NM
15. ELEVATIONS (Show whether OF, RT, CR, etc.) 6478'GL		12. COUNTY OR PARISH 13. STATE Rio Arriba NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

FULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

WATER SHUT-OFF ☒
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(Note: Report results of multiple completion on Well Completion or Recompletion Report and 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.)*

10-15-73 Spudded well. Drilled surface hole.

10-16-73 Ran 4 joints 8 5/8", 24#, J-55 surface casing, 124' set at 124'GL.
Cemented with 107 cu. ft. cement, circulated to surface. WOC 12 hours.



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

SIGNED _____

TITLE Drilling Clerk

DATE October 18, 1973

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side