

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42 R1421.
5. LEASE DESIGNATION AND SERIAL NO.NM015150
6. IF INDIAN, ALLOTTEE OR TRIBE 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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR El Paso Natural Gas Company	8. FARM OR LEASE NAME Howell F
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, NM 87401	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1760'S, 1450'E	10. FIELD AND POOL, OR WILDCAT So Blanco PC&Undes Chacra
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6939' GL
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1, T-27-N, R-8-W N.M.P.M.
	12. COUNTY OR PARISH San Juan
	13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)*

12-08-74 Pictured Cliffs TD 3496'. Ran 112 joints 2 7/8", 6.4#, J-55 production casing, 3485' set at 3496'. Baffle set at 3485'. Cemented with 494 cu. ft. cement. WOC 18 hours.

Chacra TD 4537'. Ran 145 joints 2 7/8", 6.4#, J-55 production casing, 4526' set at 4537'. Baffle set at 4526'. Cemented with 328 cu. ft. cement. WOC 18 hours. Top of cement at 2300'.

07-01-75 Pictured Cliffs PBTD 3485'. Tested casing to 4000#, OK. Perf'd Pictured Cliffs 3369', 3371', 3385', 3387', 3422', 3424' with 6 holes. Frac'd with 48,000#--20/40 sand, 48,000 gallons treated water. No ball drops. Flushed with 840 gallons water.

Chacra PBTD 4526'. Tested casing to 4000#, OK. Perf'd Chacra 4328-33' with 6 holes. Frac'd with 14,000#--20/40 sand and 14,000 gallons treated water. Dropped no balls. Flushed with 1092 gallons water.

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

SIGNED A. P. DuicoTITLE Drilling ClerkDATE July 3, 1975

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

RECEIVED

JUL 8 1975

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY