

## SUNDRY NOTICES AND REPORTS ON WELLS

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

P.O. Box 289, Farmington, New Mexico 87401

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

AT SURFACE: 990'N, 990' 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:

TEST WATER SHUT-OFF ☐

## FRACTURE TREAT

## SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

**MULTIPLE COMPLETE**

## CHANGE ZONES

**ABANDON\***

(other)

SUBSEQUENT REPORT OF:

REPORT OF  
**RECEIVED**

APR 13 1982  
(NOT

APR (NOTE: Report results of multiple completion or zone change on Form 9-330.)  
U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

(other) ☐ Set Packer to isolate casing failure. ☒

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.)\*

Ran a Baker Model C invertable packer on 1-1/4" IJ tubing to test for a casing failure. Found casing to be leaking. Left packer and tubing in well. Ran 97 jts tubing - Packer set @ 2934.73'.

Request 90 day evaluation period.

At the end of 90 days it is required to permanently repair casing in order to produce well. Notify this office by sundry notice of intent or plans to repair casing.

Subsurface Safety Valve: Manu. and Type

Set @ 432 Ft.

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

Sr. Production

**SIGNED**

~~SECRET~~

Engineer

DATE \_\_\_\_\_

April 6, 1982

APPROVED BY \_\_\_\_\_  
CONDITIONS OF \_\_\_\_\_

APPROVAL OF ANY:

**TITLE**

DATE \_\_\_\_\_

APR 14 1982

**JAMES F. SIMS**  
**DISTRICT ENGINEER**

**See Instructions on Reverse Side**

# Instructions o NMCC