

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SF-080714A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 30-6 Unit

8. FARM OR LEASE NAME

San Juan 30-6 Unit

9. WELL NO.

432

10. FIELD AND POOL, OR WILDCAT

Undes. Fruitland Coal

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 10, T-30-N, R-06-W
N.M.P.M.

12. COUNTY OR PARISH 13. STATE

Rio Arriba NM

1. OIL WELL ☐ GAS WELL ☐ ☒ OTHER
2. NAME OF OPERATOR
El Paso Natural Gas Company
3. ADDRESS OF OPERATOR
Post Office Box 4289, Farmington, NM 87499
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface: 800'N, 1840'E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6299'GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

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 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.)*

06-13-88 Spudded well at 5:30 pm 06-13-88. Drilled to 219'. Ran 5
jts. 9 5/8", 36.0#, K-55 surface casing set at 219'.
Cemented with 160 sks. Class "B" with 1/4#/sk. gel-flake and
3% calcium chloride (189 cu.ft.). Circulated to surface.
WOC 12 hrs. Tested 600#/30 minutes, held ok.

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

SIGNED

TITLE Drilling Clerk

DATE

06-15-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOC