Form 9-331		UNITED STATES	SUBMIT IN TRIPLICATE	Form approv	rd.		
				Budget Bureau No. 42 181424. 5. LEASE DESIGNATION AND NERTAL NO. NM 013688			
SUN (Do not use this	6. IF INDIAN, ALLOTTE	M OR TRIBE NAME					
OIL GAS WELL WELL	X OTHER	7. UNIT AGREEMENT NAME					
2. NAME OF OPERATOR		8. FARM OR LEASE NAME					
El Paso Natu	ral Gas C	Atlantic Com	Atlantic Com B				
3. ADDRESS OF OPERATOR		9. WELL NO.					
P. O. Box 99	0. Farmin	8A					
4. LOCATION OF WELL (1	deport location	clearly and in accordance with	n any State requirements.*	10. FIELD AND POOL, OR WILDCAT			
See also space 17 belo At surface	o w.)						
				Blanco Mesa Verde			
1825' N	, 1100' W			SURVEY OR AREA			
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.)			Sec. 23, T-31-N, R-10-W NMPM 12. COUNTY OB PARISH 13. STATE		
11. IDAMII NO.				1			
	6297' GL			San Juan	New Mexico		
16.	Check A	Other Data					
TEST WATER SHUT-O	FF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING V	VELI.		
FRACTURE TREAT		MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CA	ASING		
SHOOT OR ACIDIZE		ABANDON*	SHOOTING OR ACIDIZING	ABANDONMEI	VT*		
REPAIR WELL		CHANGE PLANS	(Other)				
(Other)		ļ <u> </u>	(NOTE: Report result Completion or Recomp	sults of multiple completion on Well ompletion Report and Log form.)			
17. DESCRIBE PROPOSED OF proposed work. If nent to this work.)	wen is directi	ERATIONS (Clearly state all per onally drilled, give subsurface	tinent details, and give pertinent dates locations and measured and true vertic	s, including estimated dat cal depths for all markers	e of starting any and zones perti-		
12-03-76	Ran 5 j Cemente	well. Drilled su oints 9 5/8", 36# d with 224 cu. ft. s; held 600#/30 m	, K-E surface casing, 22 . cement. Circulated to	27' set at 243'. o surface. WOC			

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I hereby certify that the foregoing is true and correct	TITLE	Drilling Clerk	DATE	December	7, 1	 1976
 (This space for Federal or State office use)						
APPROVED BY CONDITIONS OF APPROVAL, IF ANY	TITLE		DATE			