

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

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		5. LEASE DESIGNATION AND SERIAL NO. NM 010989	
2. NAME OF OPERATOR El Paso Natural Gas Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, New Mexico 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1500' S, 850' E		8. FARM OR LEASE NAME Fields	
14. PERMIT NO.		9. WELL NO. 2A	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6226' GL		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25, T-32-N, R-11-W NMFM	
		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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)*

07-16-77 T.D. 3516'. Ran 85 joints 7", 20#, K-55 intermediate casing, 3504' set at 3516'. Cemented with 455 cu. ft. cement. WOC 12 hours; held 1200#/30 minutes. Top of cement at 1300'.

07-19-77 T.D. 5501'. Ran 132 joints 4 1/2", 10.5#, K-55 casing liner 5460' set 5471'. Cemented with 185 cu. ft. cement. WOC 18 hours. Top of cement at 3000'.

07-24-77 PBTD 5471'. Tested casing to 4000#, ok. Perfed 5360-70', 5410-20, 5454-64 with 3 SPF and completed natural.



RECEIVED

JUL 28 1977

CLARK COUNTY, NM

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

SIGNED A. D. Busco TITLE Drilling Clerk DATE July 26, 1977

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: