

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved  
Budget Bureau No. 42-11421  
3. LEASE DESIGNATION AND SERIAL NO.

NM 010989

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. <input type="checkbox"/> 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 Fields	
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401		9. WELL NO. 4A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 840'S, 1580'E		10. FIELD AND TOWN OR WILDCAT Undes. Fruitland Blanco Mesa Verde	
14. PERMIT NO.		15. ELEVATIONS (Show whether LF, RT, GR, etc.) 6185'GL	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 28, T-32-N, R-1		12. COUNTY OR PARISH San Juan	
13. STATE NM			

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 type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input 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 checked="" type="checkbox"/>	(Other) <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.)\*

This well was proposed to be a dual Pictured Cliffs -Mesa Verde completion. It is now planned to complete as a Fruitland - Mesa Verde dual.

RECEIVED  
SEP 8 - 1977

RECEIVED  
SEP 19 1977  
OIL CON. COM.  
DIST. 3

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

SIGNED [Signature] TITLE Drilling Clerk DATE September 8, 1977

(This space for Federal or State office use)

APPROVED

APPROVED BY [Signature] TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY:

SEP 19 1977

P. J. McGRATH

[Signature]

\*See Instructions on Reverse Side

DISTRICT ENGINEER

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION FORM

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

Operator <b>EL PASO NATURAL GAS COMPANY</b>			Lease <b>FIELDS (NM-010989)</b>		Well No. <b>4A</b>
Unit Letter <b>0</b>	Section <b>28</b>	Township <b>32-N</b>	Range <b>11-W</b>	County <b>SAN JUAN</b>	
Actual Footage Location of Well: <b>840</b> feet from the <b>SOUTH</b> line and <b>1580</b> feet from the <b>EAST</b> line					
Ground Level Elev. <b>6185</b>	Producing Formation <b>FRUITLAND &amp; MESA VERDE</b>		Pool <b>UNDESIGNATED FRUITLAND BLANCO MESA VERDE</b>	Dedicated Acreage: <b>160.00 &amp; 320.00</b> Acres	

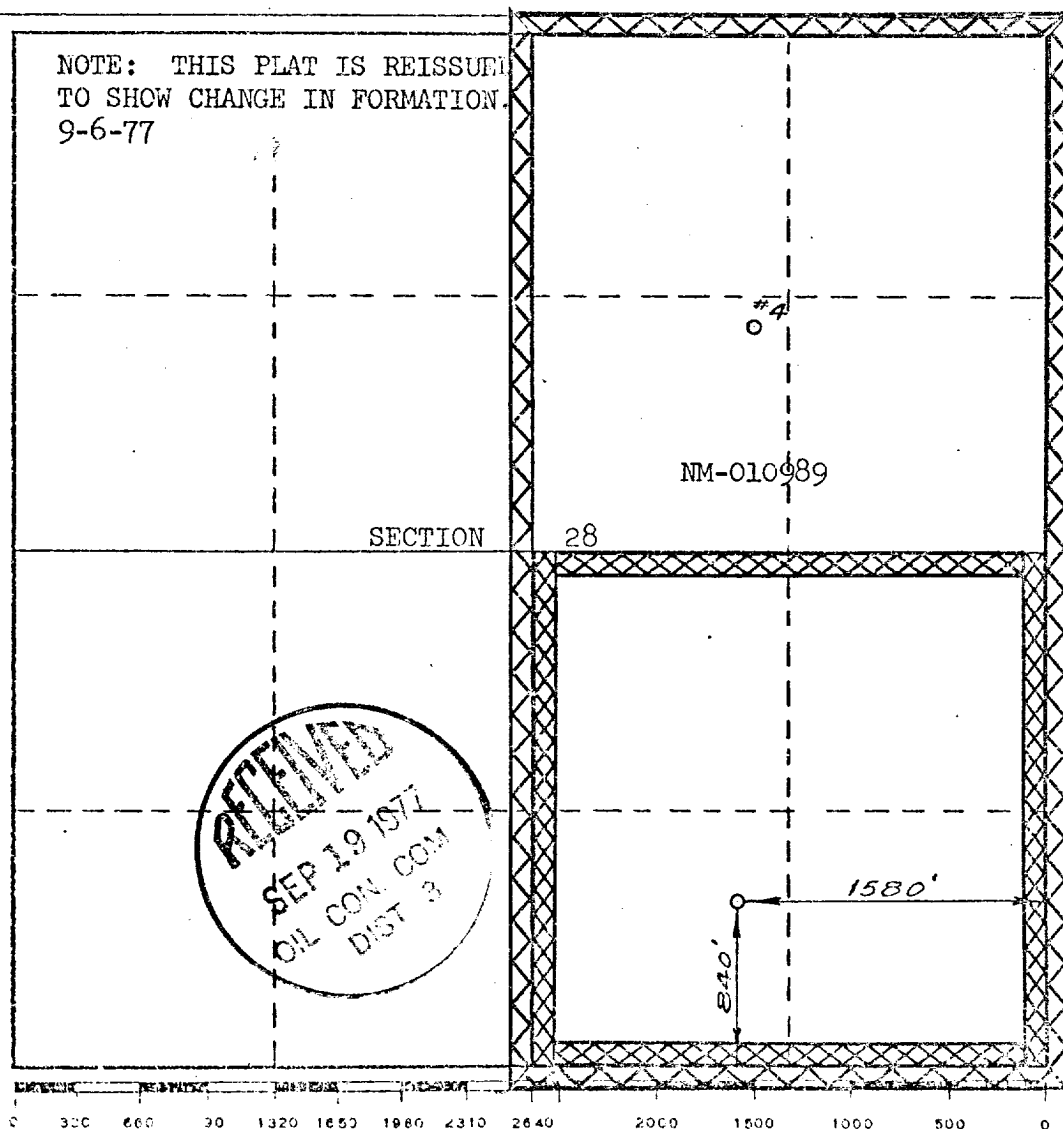
1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.  
NOTE: THIS PLAT IS REISSUED TO SHOW DUAL COMPLETION. 4-6-77

NOTE: THIS PLAT IS REISSUED TO SHOW CHANGE IN FORMATION. 9-6-77



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Original Signed by  
**D. G. Brisco**

Name  
**Drilling Clerk**  
Position  
**El Paso Natural GasCo**  
Company  
**September 8, 1977**  
Date

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed  
**MARCH 22, 1977**

Registered Professional Engineer and/or Land Surveyor

*[Signature]*

Certificate No.  
**1760**