

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well <input type="checkbox"/> gas well <input checked="" type="checkbox"/> other	5. LEASE NM 0606
2. NAME OF OPERATOR El Paso Natural Gas Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 289, Farmington, NM	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1185'N, 1575'W AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	8. FARM OR LEASE NAME Atlantic A
	9. WELL NO. 9A
	10. FIELD OR WILDCAT NAME Blanco MV & Aztec PC
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T-31-N, R-10-W NMPM
	12. COUNTY OR PARISH San Juan
	13. STATE New Mexico
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO.
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> CHANGE ZONES <input type="checkbox"/> ABANDON* <input type="checkbox"/> (other) <input type="checkbox"/>	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6144' GL
SUBSEQUENT REPORT OF <input checked="" type="checkbox"/>	
(NOTE: Report results of multiple completion or zone change on Form 9-330.)	
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.)*	

4-4-81: PBTD 5583'. Tested Casing to 4000#, OK. Perfed Pic. Cliffs: 2896-2907, 2908-2919, 2926-2937, 2938-2948, 2960-2972, 2979-2992' W/12 SPZ. Fraced w/ 70,000# 10/20 sand, 75,000 gal. wtr.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED A. D. Brisco TITLE Drilling Clerk DATE April 6, 1981

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

ACCEPTED FOR RECORD

NMOCC

APR 09 1981