

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on the
reverse side)

Form approved,
Budget Bureau No. 42-14421
5. LEASE DESIGNATION AND SERIAL NO.

NM 01594

6. 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. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
EL PASO NATURAL GAS CO.

3. ADDRESS OF OPERATOR
BOX 990

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1500'S, 1725'W

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
KELLY A

9. WELL NO.
8

10. FIELD AND POOL, OR WILDCAT
Blanco P.C.

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 15, T-51-N, R-10-W
N.M.P.M.

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6214' GL

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) _____	

(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.)*

9/5/77 T.D. 3173. Ran 101 joints. 2 7/8", 6.5#, CW-55 production casing, 5165' set at 3173'. Baffle set at 3163'. Cemented with 609 cu. ft. cement. WOC 18 hours. Top of cement at 1450'.

10/8/77 Tested casing to 4000#, OK. P.B.T.D. 3163. Perfed 2997, 5001, 5005, 5059, 3043, 3047, 3051, 3063, 3065'w/1 SPZ. Fraced w/42,000# 10/20 sand and 43,000 gals water. Flushed with 730 gals. water.



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

SIGNED D. H. Biscoe TITLE Drilling Clerk DATE 10/10/77

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
DATE

OCT 14 1977