

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 ☐ gas well ☒ other ☐
2. NAME OF OPERATOR
EL PASO NATURAL GAS CO.
3. ADDRESS OF OPERATOR
BOX 289, FARMINGTON, NEW MEXICO
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1780'S, 1495'E
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☒
☒
☐
☐
☐
☐
☐
☐

5. LEASE
NM 010989
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Fields
9. WELL NO.
10
10. FIELD OR WILDCAT NAME
Blanco PC
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 27, T-32-N, R-11-W
NMPM
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6301 GL

(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.)*

9/11/78: T.D. 3223'. Ran 103 joints 2 7/8", 6.4# JS production casing, 3214' set at 3223'. Cemented with 648 cu. ft. cement. WOC 18 hours. Top of cement 2500'.

10/17/78: Tested casing to 4000#-OK. PBTD 3213'. Perfed 3096, 3100, 3113, 3119, 3125, 3130, 3148, 3154, 3160 with 1 SPZ. Fraced w/50,000# 10/20 sand and 52,190 gallons treated water. Flushed with 798 gal. water.

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

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

SIGNED N. P. Ducco TITLE Drilling Clerk DATE 10/20/78

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

NMOC

