5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR

DEPARTMENT OF THE INTERIOR	SF 078389A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRISE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
o not use this form for proposals to drill or to deepen or plug back to a different servoir. Use Ferm 9–331–C for such proposals.)	San Juan 32-9 Unit
eservoir. Use norm 9-301-0 for such proposais.)	- }
1. ci! gas 🔀 other	San Juan 32-9 Unit 9. WELL NO.
	91 91
2. NAME OF OPERATOR EL PASO NATURAL GAS CO.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Blanco PC Ext.
BOX 990, FARMINGTON, NEW MEXICO	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec. 11, T-31-N, R-10-W
below.) AT SURFACE: 1100'S, 1500'E	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	
AT TOTAL DEPTH:	San Juan New Mexico
5. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REPORT, OR OTHER DAIN	6197' GL
EQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	OLD / OL
EST WATER SHUT-OFF	
RACTURE TREAT	
HOOT OR ACIDIZE	
EPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
EPAIR WELL JLL OR ALTER CASING ULTIPLE COMPLETE HANGE ZONES BANDON*	change on Form, 9-33237
ULTIPLE COMPLETE HANGE ZONES	
BANDON*	
otner)	
7. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is comeasured and true vertical depths for all markers and zones pertine 8/25/78: T.D. 3201'. Ran 105 joints 2 7/8'	directionally drilled, give subsurface locations and nt to this work.)*
set at 5201'. Baffle set at 5191'. Cemento 18 hours. Top of cement at 2500'.	ed with 561 cu. ft. cement. WOC
9/11/78: Tosted casing to 4000*, OK. Perfo 5066,5070,5085,5087 with 1 SPZ. Fraced with gal. water. Flushed with 714 gals. water.	1 4.,000 = 10/20 sand and 44,5.0
Subsurface Safety Valve: Manu. and Type	SEP 15 1978 Set @ STONEY SET COLON SOUNEY
HANNED TITLE Drilling Clo	
(This space for Federal or State of	
PPROVED BY	
CONDITIONS OF APPROVAL, IF ANY:	and the same of th
CONDITIONS OF AFFROYAL, II AFF.	

*See Instructions on Reverse Side



