Form 9–331					Form Approved.	
Dec. 1973		المراجع المراجع المراجع المراجع			Budget Bureau No. 42-R1424	
	UNITED ST	ATES		5. LEASE		
	DEPARTMENT OF	THE INTERIOR		Federal	NM-0525452A	
. 4	GEOLOGICAL	SURVEY		6. IF INDIAN, ALL	OTTEE 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				7. UNIT AGREEMENT NAME		
reservoir. Use Form 9-331-() for such proposals.)				8. FARM OR LEAS	ENAME Washington	
1. oil	gas 🗂				age Project	
well	well 🗀 other	Gas Storage Well	. [	9. WELL NO.		
2. NAME OF OPERATOR						
El Paso Natural Gas Co. $^{\prime}$				10. FIELD OR WILDCAT NAME		
3. ADDRESS	OF OPERATOR			Washington	Ranch Morrow	
1800 Wilco Bldg.; Midland, Texas 79701					, OR BLK. AND SURVEY OF	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17				AREA		
below.)				Sec 3. T-	26-S, R-24-E	
AT SURFA		§ 1980 FWL, Sec. 3		12. COUNTY OR P/	ARISH 13. STATE	
	ROD. INTERVAL:			Eddy	NM	
	AT TOTAL DEPTH:			14. API NO.		
		NDICATE NATURE OF NO	TICE,			
REPORT, C	DR OTHER DATA			15. ELEVATIONS (	SHOW DF, KDB, AND WD	
		المحاجب والمحاد والمحمولية والمحاجر				
-	APPROVAL TO:	SUBSEQUENT REPORT O	IF C	The state state		
TEST WATER S			•			
FRACTURE TRE SHOOT OR AC						
REPAIR WELL		- 20 20	1985			
PULL OR ALTE				(NOFE: Report result change on F	ts of multiple completion or zon	
MULTIPLE COM			145	enange off F	UIII 3-330.)	
CHANGE ZONE	s 🗍	📑 a jaroko 🗟		ίεγ.		
ABANDON*				0		
(other)		Projec	t appr	coved by NMOC	D Order #R-6175-A	

- 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.)\*
  - MOL & RU PU. Remove wellhad and set BOP. 1.
  - 2. Unseat packer. Pull tubing and packer.
  - з. Run casing inspection log. Check PBTD.
  - 4. Re-run tubing and blw well dry w/nitrogen.
  - Pull tubing. Re-perforate Morrow interval for total of 4 spf. 5.
  - 6.
  - Redress packer. Re-run tubing and packer. Hydro test tubing in hole. Set packer above Morrow perforation. Fill annulus with treated packer 7. fluid. Remove BOP and nipple up wellhead. Return well to storage service

Subsurface Safety Valve: Manu, and Type	BOP	Set @SurfaceFt.
18. I hereby certify that the foregoing is true and correct		
SIGNED Frank P. DeMasi	DATE _	1-26-82
APPROVED (This space for Federal or State office un APPROVED (Drig. Sgd.) PETER W. CHESTERTITLE CONDITIONS OF APPROVAL, IF ANY:	DATE	
FEB 8 1982 FOR		