

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION

Drawer DD

Artesia, NM 88210 FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☐ Oil Well ☐ Gas Well ☒ Other GAS STORAGE

2. Name of Operator
EL PASO NATURAL GAS CO. (J. W. MULLOY ASSOC - AGENT) ✓

3. Address and Telephone No.
1110 B, BIG SPRING MIDLAND, TX 79701 915-687-0323

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1154' FSL & 572' FWL UNIT M
SEC 34; T-25-S; R-24-E

5. Lease Designation and Serial No.
FED NM 22207

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
WASHINGTON RANCH
STORAGE AREA

8. Well Name and No.
WI NO. 13

9. API Well No.

10. Field and Pool, or Exploratory Area
WASHINGTON RANCH

11. County or Parish, State
EDDY, N MX

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
- ☐ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☒ Other REPAIR WELL

- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

1. Move on location.
2. Kill well w/brine water.
3. ND Wellhead & install BOP.
4. Install plug in packer profile nipple.
5. POH w/tubing. Install RBP @ 6600'. Test casing to 500 psi - 15 min.
6. Run Casing Inspection & Cement Bond Logs.
7. If necessary, replace damaged casing.
8. Perforate casing & TOC from Log & circ cement to surface.
9. Re-run tubing & sting into packer.
10. Circulate packer fluid in csg/tbg annulus.
11. Remove BOP. Return well to service.

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

Signed O.H. ROUTH

Title AGENT 915-687-0323

Date 1-4-94

This space for Federal or State office use

Approved by [Signature]

Title [Signature]

Date 1/25/94

Conditions of approval, if any

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See instruction on Reverse Side