TED STATES

DEPARTMENT OF THE INTERIOR

IED STATES	-22207
DEPARTMENT OF THE INTERIOR	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
GEOLOGICAL SURVEY	d. II Monat, recover and
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	8. FARM OR LEASE NAME
reservoir. Use runn y-332 diversity	Washington Ranch Storage Project
1. oil gas well other Storage	9. WELL NO.
2. NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
El Paso Natural Gas Co.	Washington Ranch
3. ADDRESS OF OPERATOR	11. SEC., T., R., M., OR BLK. AND SURVEY OR
BOX 1492 El Paso, Texas 79978 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17	AREA
below.)	Sect. 34, T-25-S, R-24-E
AT SURFACE: 1045' FWL & 2363' FNL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Eddy N. Mex.
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
PEOLIEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	GR 3720
100	
TEST WATER SHUT-OFF [] [] FRACTURE TREAT []	TO STORY
SHOOT OR ACIDIZE	RECEIVED BY
REPAIR WELL	(NO E: Report results of multiple completion or zone
PULL OR ALTER CASING	change AV Form 913814
MULTIPLE COMPLETE	0.50
ABANDON*	O. C. D.
(other)	ARTESIA, OFFICE
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent	t to this work.)*
casing inspection log. For Cut off 7" casing at 1565 7" 23# K-55 casing with B	ound 7" casing parted at 1361'. ' with inside cutter. Ran new owen casing bowl, to reconnect rom 0 - 5031' to 1000 psi, held
0 K Test above and belo	w 1565' to 3000 psi, held U.K.
Pan retrieving tool on 16	4 its. 2 //8" tubing, shul well
in, rig down and release	workover unit. Waiting on 4 1/2
tubing and packers to com	plete operations.
•	
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
Accordance to the second secon	•
18. I hereby certify that the foregoing is true and correct Director, Rese	rvoir pt. DATE 4-24-84
Accuracy of the Section (This space for Federal or State office	ce use)
21/11/1	DATE
conditions of Approval, IF ANY: MAY 1 & 1984	DATE
HINT I TOUT	

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