

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF 081155
2. NAME OF OPERATOR El Paso Natural Gas Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401		7. UNIT AGREEMENT NAME Allison Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1770'N, 870'W		8. FARM OR LEASE NAME Allison Unit
14. PERMIT NO.		9. WELL NO. 32
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6405'GL		10. FIELD AND POOL, OR WILDCAT Basin Dakota
		11. SEC. T. R., M., OR BLK. AND SURVEY OR AREA Sec. 21, T-32-N, R-6-W NMPM
		12. COUNTY OR PARISH San Juan
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input checked="" type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input checked="" type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

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

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.)*

10-10-73 TD 8058'. Ran 263 joints 4 1/2", 11.6 and 10.5#, KS production casing 8044' set at 8058'. Float collar set at 8040'. Stage tool set at 5756' and 3337'. Cemented first stage with 465 cu. ft. cement, second stage with 234 cu. ft., third stage with 595 cu. ft. cement. WOC 18 hours. Top of cement at 800'.

11-17-73 PBTD 8040'. Tested casing to 4000#-OK. Perf'd 7874', 7876', 7922', 7944', 7946', 7996' and 7998' with one shot per zone. Frac'd with 46,400# 40/60 sand and 54,460 gallons treated water. No ball drops. Well sanded off, no flush.



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

SIGNED

A. G. Sikes

TITLE

Drilling Clerk

DATE

November 26, 1973

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NOV 28 1973

*See Instructions on Reverse Side