UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other ☐

2. NAME OF OPERATOR
El Paso Natural Gas Company

3. ADDRESS OF OPERATOR
P. O. Box 289, Farmington, N. M. 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below)
AT SURFACE: 850'N, 990'W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
SF 078882

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Canyon Largo Unit

8. FARM OR LEASE NAME
Canyon Largo Unit

9. WELL NO.
144

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T25N, R6W

12. COUNTY OR PARISH	13. STATE
Rio Arriba	New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6858 G.L.

	REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☐	
REPAIR WELL	☒	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☐	☐

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

(other) Temporary casing repair- Would like approval from day packer is set
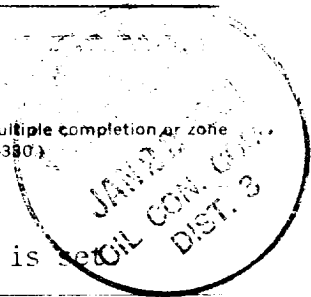
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

M.O.L. & R.U.
Rotate and recipicate tubing
Circulate water down tubing & up annulus to clean wellbore.
Pull tubing from well
Run 4 1/2" x 2 3/8" packer in well and set @7000'.
Release rig.

Approved for 90 days after packer set - Must file subsequent report indicating date. After 90 days, well must be permanently repaired or PXA-

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _____ TITLE Production Engineer DATE January 16, 1981

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JAN 21 1981
James F. Sims
JAMES F. SIMS

*See Instructions on Reverse Side

NMOCC