

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 <input type="checkbox"/> gas well <input checked="" type="checkbox"/> other <input type="checkbox"/>
2. NAME OF OPERATOR El Paso Natural Gas Company
3. ADDRESS OF OPERATOR P.O. Box 289, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 870'S, 1540'E AT TOP PROD. INTERVAL: AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> CHANGE ZONES <input type="checkbox"/> ABANDON* <input type="checkbox"/> (other) <input type="checkbox"/>
SUBSEQUENT REPORT OF: <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

5. LEASE SF 078911
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME Lindrith Unit
8. FARM OR LEASE NAME Lindrith Unit
9. WELL NO. 101
10. FIELD OR WILDCAT NAME S. Blanco Pictured Cliffs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T-24-N, R-3-W NMPM
12. COUNTY OR PARISH Rio Arriba
13. STATE New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD) 7124' GL

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

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.)*

9-18-80: Spudded well. Drilled surface hole. Ran 3 joints 8 5/8", 24#, K55 surface casing 121' set at 133'. Cemented w/ 106 cu. ft. cement. Circ. to surface WOC 12 hour; held 600#/30 minutes.



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

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

SIGNED Sam Shadford TITLE Drilling Clerk DATE September 22, 1980

(This space for Federal or State office use)

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