

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

RECEIVED

JUN 26 1985

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
El Paso Natural Gas Company

3. ADDRESS OF OPERATOR
P.O. Box 4289, Farmington, New Mexico 87499-4289

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1800'S, 1750'E, Sec. 16, T-26-N, R-5-W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6619' DF

5. LEASE DESIGNATION AND SERIAL NO.
Jicarilla Cont. #109 PC

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Cont. #109 PC

7. UNIT AGREEMENT NAME
Jicarilla "F"

8. FARM OR LEASE NAME
Jicarilla "F"

9. WELL NO.
#11

10. FIELD AND POOL, OR WILDCAT
South Blanco PC

11. SEC., T., R., M., OR B.Y. AND SURVEY OR AREA
Sec. 16, T26N, R5W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mex.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) Well Evaluation ☒

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(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.) *

We have been unable to regain production on this well as of yet.
As a result, we request an additional 90 days to work with this well in an attempt to avoid plugging a potentially productive well.

RECEIVED
JUN 28 1985
OIL CONTROL
DIST. 2

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

SIGNED Scott H. Lindsay
(This space for Federal or State office use)

TITLE Production Engineer

APPROVED

DATE June 25, 1985

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

JUN 27 1985

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

NMOCC