

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

5. LEASE DESIGNATION AND SERIAL NO.

SF078879

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDY 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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		
2. NAME OF OPERATOR El Paso Natural Gas Company		
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, NM 87401		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1490'S, 1025'E		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6784' GL	
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)
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input checked="" type="checkbox"/> <input type="checkbox"/> <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"/>		
REPAIRING WELL ALTERING CASING ABANDONMENT*		
<small>(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small>		
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.) *		
04-29-76 Test surface casing; held 600#/30 minutes. 05-02-76 TD 2695'. Ran 100 joints 2 7/8", 6.4#, H-40 production casing, 2685' set at 2695'. Baffle set at 2684'. Cemented with 225 cu. ft. cement. WOC 18 hours. Top of cement at 1800'. 05-13-76 Test casing to 4000#--OK. PBT 2684'. Perf'd 2558', 2564', 2570', 2621', 2624', 2627', 2636' with 1 shot per zone. Frac'd with 40,000#--10/20 sand and 44,480 gallons treated water. Dropped no set of balls. Flushed with 672 gallons water.		

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

SIGNED W. G. Bruce

TITLE _____

Drilling Clerk

DATE May 14, 1976

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____