

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF078879

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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. OIL WELL ☐ GAS WELL ☒ 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

7. UNIT AGREEMENT NAME  
Canyon Largo Unit

8. FARM OR LEASE NAME  
Canyon Largo Unit

9. WELL NO.  
244

10. FIELD AND POOL, OR WILDCAT  
Ballard PC

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA  
Sec. 23, T-25-N, R-7-W  
N.M.P.M.

12. COUNTY OR PARISH  
Rio Arriba

13. STATE  
New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)			

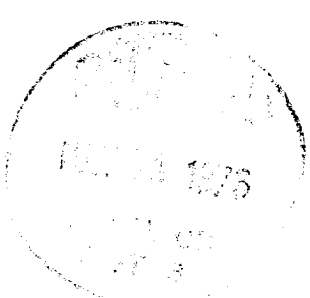
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

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.  
PBTD 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 A. D. Biero

TITLE Drilling Clerk

DATE May 14, 1976

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side