Form 9–331 Dec. 1973	Form Approved.
UNITED STATES	Budget Bureau No. 42-R1424 5. LEASE
DEPARTMENT OF THE INTERIOR	SF 079160
GEOLOGICAL SURVEY	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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME Rincon Unit
1 oil	8. FARM OR LEASE NAME Rincon Unit
1. Oil gas to other 2. NAME OF OPERATOR	9. WELL NO. 232
El Paso Natural Gas Company	10. FIELD OR WILDCAT NAME Otero Chacra
3. ADDRESS OF OPERATOR P.O. Box 289, Farmington, NM	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec. 12, T-26-N, R-7-W
AT SURFACE: 1710'N, 1550'E AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH:	Rio Arriba New Mexico 14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REPAIR WELL PULL OR ALTER CASING	(NOTE: Report results of multiple company of or zone change on Eform \$ 1330) CON. COM. DIST. 3
ABANDON*	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is di measured and true vertical depths for all markers and zones pertinent	rectionally drilled, give subsurface locations and
12-4-80: Spudded well. Drilled surface hole 24#, K-55 surface casing 128' set aft. cement. Circ. to usrface. WOC	t 142'. Cemented w/ 106 cu
12-15-80: TD 3901'. Ran 144 joints 2 7/8", 6 3891' set at 3901'. Baffle set at cement. WOC 18 hours. Top of cement	.4#, K-55 production casing 3891'. Cemented w/ 743 cu. ft nt at 1250'.
12-30-80: PBTD 3891' Tested casing to 4000#, 6 3760,3765,3770,3775,3780,3847,3852' w 38,000 gal. wtr. Flushed w/ 1450 gal	OK. Perfed: N/1 SPZ. Fraced w/37.000# 10/20
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED AL Suises TITLE Drilling Cl	Lerk December 17, 1980
(This space for Federal or State office use)	

BW

NMOCC

_____ DATE __