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UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY DIST. 3

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 ☐ gas ☒ other ☐
2. NAME OF OPERATOR
El Paso Natural Gas Company
3. ADDRESS OF OPERATOR
Box 4289, Farmington, New Mexico
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1650'N, 1650'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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
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5. LEASE
SF 078875
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
Canyon Largo Unit
8. FARM OR LEASE NAME
Canyon Largo Unit
9. WELL NO.
325
10. FIELD OR WILDCAT NAME
Devils Fork Gallup Ext.
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 33, T-25-N, R-6-W N.M.P.M.
12. COUNTY OR PARISH
Rio Arriba
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6398' 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.)*

12-30-83 P.B.T.D. 5977'. Tested casing to 4000# O. K. Perforated 5626, 5637, 5650, 5655, 5690, 5719, 5743, 5754, 5768, 5778, 5788, 5808, 5827, 5838, 5857, 5872, 5886' w/1 SPZ. Fractured w/125,000# 20/40 sand and 85,000 gallons foam. Flushed w/3544 gallons foam.

Perforated 4679, 4704, 4717, 4728, 4736, 4746, 4774, 4790, 5135, 5325, 5389, 5538, 5573' w/1 SPZ. Fractured w/80,000# 20/40 sand, 65,000 gallons foam. Flushed w/3093 gallons foam.

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

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

SIGNED A. G. Dices TITLE Drilling Clerk DATE January 5, 1984

(This space for Federal or State office use)

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