5. 11 AST

SF 080675

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

UNITED STATES

DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS San Juan 27-4 Unit (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.) 8. FARM OR LEASE NAME San Juan 27-4 Unit 1. oil well 1 well 9. WELL NO. 101 2. NAME OF OPERATOR El Paso Natural Gas Company 10. FIELD OR WILDCAT NAME Basin Dakota 3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 28, T-27-N, R-4-W4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 2010'N, 1690'E **NMPM** AT SURFACE: 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: Rio Arriba AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone PULL OR ALTER CASING change on Form 9-330.) MULTIPLE COMPLETE CHANGE ZONES ABANDAN*quest for non-cancellation of approval 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.)* This location has been built. We do not know when this well will be drilled, but since the location has been built, we request that our Permit to Drill not be cancelled. Subsurface Safety Valve: Manu. and Type 18. Thereby, certify that the foregoing is true and correct Drilling Clerk November 7. DATE ____ (This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY: 7 1977

NOV

*See Instructions on Reverse Side

U. S. GEOLUGICAL SURVEY DURANGO, COLO.