(May 1000)	UNITED STATES MENT OF THE INTERI	SUBMIT IN TRIPLICATE. (Other instructions on reverse side)	Form approved. Budget Bureau No. 42-R1424. LEASE DESIGNATION AND SERIAL NO.
· G	SEOLOGICAL SURVEY		SF 079521 - A
SHNDBA MOTI	CES AND REPORTS C	NI WELLS	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.)			
I. OIL GAS []			7. UNIT AGREEMENT NAME
WELL WELL Y OTHER			
2. NAME OF OPERATOR			8. FARM OR LEASE NAME
El Paso Natural Gas Company 3. ADDRESS OF OPERATOR			San Juan 28-5 Unit
Box 990 Farmington, New Mexico			50
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde
Unit letter M, 1090'S, 1150'W, Sec. 28, T-28-N, R-5-W, NMPM			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 28-28'N-5'W
14. PERMIT NO.	15. ELEVATIONS (Show whether DF.	RT. GR. etc.)	12. COUNTY OR PARISH 13. STATE
	6567 GL	• •	R A N. Mex.
	·		
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:			JENT REPORT OF:
TEST WATER SHUT-OFF	CLL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT M	ULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	BANDON*	SHOOTING OR ACIDIZING	ABANDON MENT*
	HANGE PLANS	(Other) Tubing Ins	of multiple completion on Well
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OPER	PATIONS (Clearly state all portingut	Completion or Recompl	etion Report and Log form.)
5723 feet. The pu	in a former tubingles APR 3	installation is to to a set of the set of th	e used as a production
	DIST		traction to the control of the contr
18. I hereby certify that the foregoing is	true and correct		
SIGNED Life have	TITLE Pr	oduction Engineer	DATE <u>April 2, 196</u> 8
(This space for Federal or State office	e use)		
APPROVED BY	TITLE		DATE
CONDITIONS OF APPROVAL, IF AN			