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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input type="checkbox"/> Federal <input type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.

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" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER Temporary Abandonment	7. Unit Agreement Name San Juan 28-5 Unit
2. Name of Operator El Paso Natural Gas Company	8. Farm or Lease Name San Juan 28-5 Unit
3. Address of Operator PO Box 990, Farmington, NM 87401	9. Well No. 4 (TA)
4. Location of Well UNIT LETTER G, 1650 FEET FROM THE North LINE AND 1650 FEET FROM THE East LINE, SECTION 19 TOWNSHIP 28N RANGE 5W NMPM.	10. Field and Pool, or Wildcat Blanco Mesa Verde
15. Elevation (Show whether DF, RT, GR, etc.) 6589'GL	12. County Rio Arriba

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER Status & Intentions ☒

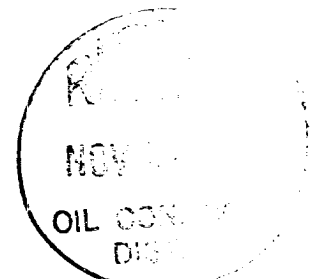
PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIATION WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

This well was temporarily abandoned in December, 1968. It is intended to recommend that the well be either plugged and abandoned or plugged back and converted to a water well.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED _____ TITLE Petroleum Engineer DATE November 17, 1971

Original Signed by Emery C. Arnold

APPROVED BY _____ TITLE _____ DATE NOV 18 1971

CONDITIONS OF APPROVAL, IF ANY: