UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

Form approved.
Budget Buregu No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

	SF 078417			
SUNDRY I (Do not use this form for Use "Al	6. IF INDIAN, ALLOTTEE	OR TRIBE NAME		
1. OIL CAS TH	7. UNIT AGREEMENT NAME			
WELL LA OT	San Juan 28-7 Unit			
2. NAME OF OPERATOR	8. FARM OR LEASE NAME			
El Paso Natural	San Juan 28-7 Unit			
3. ADDRESS OF OPERATOR	9. WELL NO.			
Box 990 Farmir	179			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.			10. FIELD AND POOL, OR WILDCAT	
See also space 17 below.) At surface	Undes Pictured Cliffs			
			11. SEC., T., R., M., OR E SURVEY OR AREA	
1075'S, 1135'E	Sec. 7, T-28-N, R-7-W			
_ 1,	NMPM			
14. PERMIT NO.	15. ELEVATIONS (Show whether	15. ELEVATIONS (Show whether DF, RT, GR, etc.)		13. STATE
	67%6'ar		Rio Arriba	New Mexico
16. (he		e Materia of Natice, Report, or (
1 93165 46	: 10 Though Triang			
TEST WATER St. 2-OLF	PULL OR ALTER CASING		REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONME	NT*
REPAIR WELL	CHANGE PLANS	(Other)		
(Other)		(NOTE: Report result Completion or Recom	s of multiple completion pletion Report and Log for	on')

- 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.) *
 - T.D. 3532'. Ran 115 joints 2 7/8" 6.4#, J-55 production casing, 3521' set at 3532'. Baffle set at 3521'. Cemented with 407 cu.ft. cement. 1-2-74 Top of cement at 2050'. WOC 18 hours.
 - 4-8-74 Tested casing to 4000#-0K. PBTD 3521'. Perf'd 3414-34' with 20 shots per zone. Frac'd with 28,000# 10/20 sand and 30,250 gallons treated water. Dropped no balls. Flushed with 850 gallons water.



18, I hereby certify that the foregoing is true and correct BIGNED A. D. D. W.C.	TITLE _	Drilling Clerk	DATE 4-10-74
(This space for Federal or State office use)			
APPROVED BY	TITLE _		DATE
CONDITIONS OF APPROVAL, IF ANY:		7.	្រុះ ស្ថិ្ស សុខ ដែ

