

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved,  
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF079294

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.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

P. O. Box 990, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.  
At surface

1490'S, 1480'W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6174' GL

7. UNIT AGREEMENT NAME

San Juan 28-7 Unit

8. FARM OR LEASE NAME

San Juan 28-7 Unit

9. WELL NO.

222

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 25, T-28-N, R-7-W  
N.M.P.M.

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

REPAIRING WELL

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

ALTERING CASING

ABANDONMENT\*

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

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.)\*

04-25-75 TD 3161'. Ran 75 joints 7", 20#, K-55 intermediate casing, 3149' set at 3161'. Cemented with 249 cu. ft. cement. WOC 12 hours, held 1200#/30 minutes. Top of cement at 2100'.

05-01-75 TD 7346'. Ran 228 joints 4 1/2", 10.5 & 11.6#, K-55 production casing, 7335' set at 7346'. Float collar set at 7340'. Cemented with 646 cu. ft. cement. WOC 18 hours, top of cement at 2950'.

05-03-75 PBTD 7340'. Tested casing to 4000#, OK. Perf'd 7130', 7146', 7163', 7248', 7260', 7284', 7314', 7323', 7331' with 1 shot per zone. Frac'd with 60,000--40/60 sand and 61,000 gallons treated water. No ball drops. Flushed with 4914 gallons water.

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

SIGNED

*A. D. Duess*

TITLE Drilling Clerk

DATE

May 09, 1975

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side