16.

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

Form approved.
Budget Bureau No. 42 R1425. LEASE DESIGNATION AND SERIAL NO.

Rio Arriba | New Mexico

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	SF0/841/					
SUNDRY N (Do not use this form for J Cse "API	6. IF INDIAN, ALLOTTEE OR TRIBE NAME					
OIL GAS X OTH	ER	-San Juan 28-7 Unit				
El Paso Natural C	as Company	8. FARM OR LEASE NAME San Juan 28-7 Unit				
P. O. Box 990, Fa	rmington, NM 87401	9. WELL NO. 245				
LOCATION OF WELL (Report locat See also space 17 below.) At surface	10. FIELD AND POOL, OR WHIDCAT  South Blanco PC Ext.  11. SEC., T., R., M., OR BLE, AND  SURVEY OR AREA  Sec. 18, T-28-N, R-7-W  N.M.P.M.					
820'N, 1560'E						
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE				
	6781' GL	Rio Arriba   New Mexico				

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

NOI		aubacquent autual vs.						
TEST WATER SHUT-OFF	PULL OR ALTER CASING		WATER SHUT-0	orr [	X		REPAIRING WEI	.I.
FRACTURE TREAT	 MULTIPLE COMPLETE		FRACTURE TRE	ATMENT			ALTERING CASI	NG
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR	ACIDIZING			ABANDON MENT	٠
REPAIR WELL	CHANGE PLANS		(Other)				<u> </u>	
(Other)	 		(Note: I Completi	Report resultion or Reco	ilts of mpleti	' multiple lon Repor	e completion on t and Log form.	Well

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.) \* 

06-23-76 Spudded well. Drilled surface hole. Ran 3 joints 8 5/8", 24#, KS surface casing, 125' set at 136'. Cemented with 106 cu. ft. cement. Circulated to surface. WOC 12 hours; held 600#/30 minutes.



18. I hereby certify that the foregoing is true and correct SIGNED	TITLE	Drilling Clerk	DATE June 24, 1976
(This space for Federal or State office use)	<del></del>		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	,	DATE