UNITED STATES DEPARTMENT OF THE INTERIOR

	Budget Bureau No. 42-R1424
	5. LEASE 20 00 100 100 100 100 100 100 100 100 1
	SF 078498 글로를 및 원동료
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNIT AGREEMENT NAME
t	San Juan 28-7 Unit
	8. FARM OR LEASE NAME
	San Juan 28-7 Unit
_	San Juan 28-7 Unit 07-1 9. WELL NO. 25-51 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	192 말음물환 한 중점단
_	10. FIELD OR WILDCAT NAME
	Basin Dakota≾
_	11. SEC., T., R., M., OR BLK. AND SURVEY OR
7	AREA Sec. 33, T-28-N, R-7-W
	NMPM 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	12. COUNTY OR PARISH 13. STATE
	Rio Arriba New Mexico
	14. API NO 월일공유 항달동창

DEFARTMENT OF THE INTERIOR	<u>SP U/8498 第3日 🛨 智楽型</u>		
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
	20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME		
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	San Juan 28-7 Unit		
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME		
oil gas X other	San Juan 28-7 Unit		
	9. WELL NO. இதி		
2. NAME OF OPERATOR	192		
EL PASO NATURAL GAS CO.	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR	Basin Dakota = " Sha		
BOX 289, FARMINGTON, NEW MEXICO	11. SEC., T., R., M., OR BLK. AND SURVEY OF		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec. 33, T-28-N, R-7-W		
below.)	NMPM CLASS B BEES		
AT SURFACE: 936'N, 990'W	12. COUNTY OR PARISH 13. STATE		
AT TOP PROD. INTERVAĹ: AT TOTAL DEPTH:	Rio Arriba - New Mexico		
	14. API NO. 음일음을 보고 보고 말했다.		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	물리 보고 그 이 성인 취임		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD		
DECULECT FOR ADDROVAL TO. CURRECULENT DEPORT OF	6652' GL 주문부표 중 취임하다		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	5 5 5 4 L I		
TEST WATER SHUT-OFF U 🔀 FRACTURE TREAT \square	조건 6명 보 구요합성		
SHOOT OR ACIDIZE			
REPAIR WELL	(NOTE: Report results of multiple completion or zone		
PULL OR ALTER CASING 🔲	change on Form 9-330.)		
MULTIPLE COMPLETE	2 1070 is being in the district to		
CHANGE ZONES ABANDON*			
(15-5)	and the state of t		
(other) U. R. (Sec. 1)	생각 (CO) 장마		
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			

Standing to the standing of th measured and true vertical depths for all markers and zones pertinent to this work.)*

11/30/78: Spudded well. Drilled surface hole.

12/1/78: Ran 5 joints 9 5/8", 36# K-55 surface casing, 336 set at 349! Cemented with 276 cu. ft. cement. Circulated to surface. WOC 12 hours; held 600#/30 minutes.

og ha Lok ta Domest Janet

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18. I hereby of rtify that the foregoing is true and correct TITLE Drilling Clerk __ DATE (This space for Federal or State office use)

APPROVED BY _ TITLE CONDITIONS OF APPROVAL, IF ANY:

Subsurface Safety Valve: Manu. and Type ___

11 7 417 7 L postible of continued to the continue of the Procedures 1 ebida facional ebidationes procedures 1

Set @

DATE

See Instructions on Reverse Side