Dec. 1973	Form Approved. Budget Bureau No. 42-R1424
UNITED STATES	
DEPARTMENT OF THE INTERIOR	5. LEASE 252 8 655 SF 080516-B 4 955
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WEL	
	트의 시민 그는 이렇게 되는 것 같은 이렇게 되었다. 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
(Do not use this form for proposals to drill or to deepen or plug back to a direservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME & CAS
1. oil gas 🖂	San Juan 28-5 Unit
well well other	9. WELL NO. 9 3 3 5 5 5
2. NAME OF OPERATOR	101 27 7 7 8 8 8 8 8 8 8
EL_PASO_NATURAL_GAS_CO.	10 FIELD OR WILLDOAT NAME: 7 GEV
3. ADDRESS OF OPERATOR	Basin Dakota
BOX 289, FARMINGTON, NEW MEXICO	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See spa	
below.)	NMPM = 2 = Bullet
AT SURFACE: 1470'S, 1840'W AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE 2
AT TOTAL DEPTH:	Rio Arriba 👸 🐰 🖔 👼 💮
	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NO REPORT, OR OTHER DATA	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT O	DE: 7499¹ GI≶ (15 15 15 15 15 15 15 15 15 15 15 15 15 1
TEST WATER SHUT-OFF	7. विकास कर्मा
FRACTURE TREAT	
SHOOT OR ACIDIZE	A Manager Hand And And And And And And And And And A
REPAIR WELL	(NOTE: Report results of multiple completion or zone
MULTIPLE COMPLETE	change on Form 9–330.)— and a second on the change of the
CHANGE ZONES	
ABANDON*	onofficely onofficely onuncely on
(other)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clear	
including estimated date of starting any proposed work. If we	ell is directionally drilled, give subsurface locations and
measured and true vertical depths for all markers and zones p	ertinent to this work.)* (학교 등 등 학교 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등
12/4/78: Spudded well. Drilled sur	face hole Ran 5 joints 9 5/8"
36# K-55 surface casing, 207' set at	그는 그
	12 hours; held 600#/30 minutes?
comme. Girculated to Sariate, neg	LANGER E TENE
	An Environment before the state of the state
	See to appropriate to
	그 그 그 그는 그는 맛들어 없는 사람들이 가는 그 그 그 때문에
Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct	2
SIGNED M. F. SHISCO TITLE Drilling	Clerk DATE 12/6/78 43 55 43
(This space for Federal or S	state office use)
	DATE Office use)
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	
CONDITIONS OF AFFROYAL, IF ANT:	Heling And Andrews And
,	weekse Side
	History of Carlotter and Carlo
*See instructions on Re	everse Side on the company of the side of the company of the compa