Form 9–331
Dec. 1973

Form Approved.
Budget Bureau No. 42–R1424

# UNITED STATES
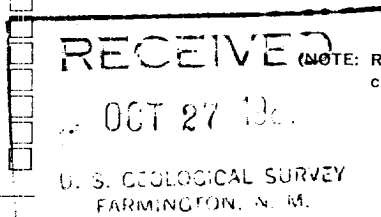## DEPARTMENT OF THE INTERIOR
### GEOLOGICAL SURVEY

## 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 Form 9–331–C 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 289, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)     900'S, 1850'E
   AT SURFACE:
   AT TOP PROD. INTERVAL:
   AT TOTAL DEPTH:

5. LEASE
   SF 078497

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
   San Juan 28-7 Unit

8. FARM OR LEASE NAME
   San Juan 28-7 Unit

9. WELL NO.
   257 E

10. FIELD OR WILDCAT NAME
    Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA     Sec. 19 , T-28-N, R-7-W
    NMPM

12. COUNTY OR PARISH    13. STATE
    Rio Arriba            New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
    6234' GL

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:     SUBSEQUENT REPORT OF: ☒

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) _____

RECEIVED
OCT 27 19..
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

(NOTE: Report results of multiple completion or zone change on Form 9–330.)

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.)*

10-23-81: TD 7333'.  Ran 184 joints of 4 1/2", 11.6 & 10.5#, K-55 production casing 7319' set 7333'.  Float collar set at 7324'.  Cemented w/ 653 cf. cement.  WOC 18 hrs.

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NOV 2 – 1981
OIL CON. COM.
DIST. 3

OCT 2 0 19..
FARMINGTON
BY _____

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _Leigh Bradfield_  TITLE Drilling Clerk  DATE October 27, 1981

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side
NMOCC