Form Approved.

	Budget	Bureau	No.	42-R1	42
					_
FASE					

UNITED STATES	5. LEASE		
DEPARTMENT OF THE INTERIOR	SF 079192		
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME		
(Do not use this form for r roposals to drill or to deepen or plug back to a different	San Juan 28-6 Unit		
reservoir. Use Form 9-331-3 for such proposals.)	8. FARM OR LEASE NAME		
1. oil gas 🕞	San Juan 28-6 Unit		
1. oil gas 🔀 other	9. WELL NO.		
2. NAME OF OPERATOR	223		
El Paso Natural Gas Company	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR	Blanco Pic. Cliffs		
P.O. Box 209, Farmington, NM 87401	11. SEC., T., R. M., OR BLK. AND SURVEY OR		
4. LOCATION OF WE L (REPORT LOCATION CLEARLY. See space 17	AREA Sec. 17,T-28-N, R-6-W		
below.) 880 N, 1840'E	NMPM		
AT SURFACE:	12. COUNTY OR PARISH 13. STATE		
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	Rio Arriba New Mexico		
	14. API NO.		
16. CHECK APPROPR ATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	TE ELEVATIONS (SURVINE AND AND AND		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF	6807' GL		
TEST WATER SHUT-O-F	N.		
FRACTURE TREAT	N		
SHOOT OR ACIDIZE			
REPAIR WELL PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9-330.)		
MULTIPLE COMPLETE			
CHANGE ZONES			
ABANDON*			
(other)			
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertined	directionally drilled, give subsurface locations and		
5-13-81: Spudded well. Drilled surface hole. Ran 3 surface casing 120' set at 132'. Cemented surface. WGC 12 hours; held 600#/30 minutes.	joints of 8 5/8", 24#, J-55 w/ 106 cf. cement. Circ. to OIL CON. CON.		
Subsurface Safety Valve: Manu. and Type 18. I hereby pertify that the foregoing is true and correct SIGNED TITLE (This space for Federal or State of APPROVED BY	rk June 15, 1981		
CONDITIONS OF APPROVAL, IF ANY:	A 11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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*See Instructions on Reverse Side

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