well

below.)

AT SURFACE:

AT TOTAL DEPTH:

NM

UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR SF079290 6. IF INDIAN, ALLOTTEE OR TRIBE NAME **GEOLOGICAL SURVEY** 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS San Juan 28-7 Unit (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.) 8. FARM OR LEASE NAME San Juan 28-7 Unit gas other 9. WELL NO. 2. NAME OF OPERATOR 164E El Paso Natural Gas Company 10. FIELD OR WILDCAT NAME 3. ADDRESS OF OPERATOR Basin Dakota P. O. Box 4289, Farmington, NM 87401 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 Sec. 13 T28N, R7W

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

1170'S, 1800'E

15. ELEVATIONS (SHOW DF, KDB, AND WD) 6650'GL

12. COUNTY OR PARISH 13. STATE

Rio Arriba

14. API NO.

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)

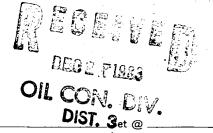
AT TOP PROD. INTERVAL:

SUBSEQUENT REPORT OF: RECEIV BUREAU OF LAND MAN

OEU (NOTE: REMOENT sults of multiple completion or zone MANA OF LAND MANA (PARESOURCE) (NOTE: RESOURCE) (NOTE: RESOURCE)

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.)*

12-11-83 TD 3746'. Ran 91 jts. of 7" 20.0 # K-55, intermediate casing 3733', set at 3745'. Cmted. w/ 446 cf. cmt. WOC 12 hours; held 1200#/30 minutes. Top of cmt. 2400'.



Subsurface Safety Valve: Manu. and	Туре	DIST. 3et @Ft.
18. I hereby certify that the foregoin	g is true and correct	
SIGNED M. D. SHE	TITLEDrilli	ng Clerk DATE December 16, 1983
	(This space for Federal or	State office use) ACOEPTED FOR DECORD
APPROVED BY	TITLE	·
CONDITIONS OF APPROVAL, IF ANY:		0E0:2:2:1983

*See Instructions on Reverse Side 😹

NMOCC

المناكلة عداد ووساء والمان ويأور والارادة