

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

9047201 000000

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <p>2. Name of Operator El Paso Natural Gas Company</p> <p>3. Address &amp; Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700</p> <p>4. Location of Well, Footage, Sec, T, R, M. 680'S, 1140'W Sec.19, T-28-N, R-6 W, NMPM</p>	<p>5. Lease Number SF-080430B</p> <p>6. If Indian, All.or Tribe Name</p> <p>7. Unit Agreement Name San Juan 28-6 Unit</p> <p>8. Well Name &amp; Number San Juan 28-6 Unit #406</p> <p>9. API Well No.</p> <p>10. Field and Pool Basin Fruitland Coal</p> <p>11. County and State Rio Arriba County, NM</p>
--	--

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

Type of Submission	Type of Action	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	

13. Describe Proposed or Completed Operations

Please make the following revisions on the well completion report:

Logs run: DIL, LDT-HRL, CNL-NGT.

Top of Pictured Cliffs formation: 3347'

RECEIVED  
MAR 29 1990  
OIL CON. DIV.  
DIST. 3

Accepted For Record  
MAR 26 1990  
[Signature]  
[Stamp]

14. I hereby certify that the foregoing is true and correct  
Signed [Signature] Title Regulatory Affairs Date 2-20-90

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITION OF APPROVAL, IF ANY: