

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 ☐ gas ☒ other ☐
2. NAME OF OPERATOR
El Paso Natural Gas Company
3. ADDRESS OF OPERATOR
P.O. Box 4289, Farmington, NM 87499
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1130' FSL, 990' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

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) ☐

SUBSEQUENT REPORT OF:

RECEIVED
MAY 27 1983
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

5. LEASE
I-149- IND 8467-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo Tribal
7. UNIT AGREEMENT NAME
Huerfanito Unit
8. FARM OR LEASE NAME
Huerfanito Unit
9. WELL NO.
#45
10. FIELD OR WILDCAT NAME
So. Blanco - PC
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 24, T-27-N, R-9-W
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6189' DF

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.)*

5-24-83: Spot a 45 sk plug thru tubing at TD. Unable to circulate.
5-25-83: 1) Tag plug at 1965' and circulated. Spot a plug from 1965' to 1865'.
2) Perforate at 1430' and circulate to surface thru the bradenhead.
Cement from 1430' to 1330' inside and outside the 5½" casing.
3) Perforate at 1150' and circulate to surface, cement inside and outside the 5½" casing to 1050'.
5-26-83: Perforate at 150' and circulate cement to surface.
Cut off wellhead and install dry hole marker.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED John Miller TITLE Production Engineer DATE May 27, 1983

(This space for Federal or State office use)

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

Approved as to plugging of the well bore.
Liability under bond is retained until
surface restoration is completed.

OPERATOR

*See Instructions on Reverse Side

RECEIVED
AUG 13 1988
OIL CON. DIV.
DIST. 3
APPROVED
AS AMENDED

DEC 20 1984

John Miller
M. MILLENBACH
AREA MANAGER