

STATE OF NEW MEXICO
OIL CONSERVATION COMMISSION
1000 Rio Brazos Road
Aztec, New Mexico 87410

September 16, 1974

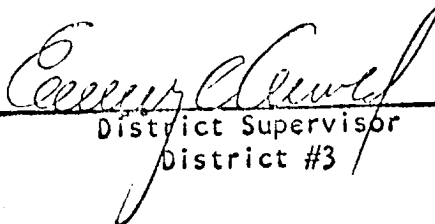
El Paso Natural Gas Co.
Box 990
Farmington, New Mexico

Attention: Mr. John Ahlm

SUBJECT: NON-STANDARD GAS PRORATION UNIT CONSISTING OF 145.87 ACRES
IN THE Undesignated Chacra GAS POOL DESCRIBED AS
FOLLOWS:

TOWNSHIP 28 NORTH, RANGE 8 WEST, NMPM
SECTION: 32 SW/4

By authority granted me by Rule 5(B) of Order No. R-1670, as amended, the
above-described acreage has been approved as a non-standard gas proration
unit to be dedicated to the Phillips
Well No. 6, located 800/S; 1575/W of said
Section 32.


District Supervisor
District #3

cc: Oil Conservation Commission
Santa Fe, New Mexico

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 013363

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Phillips

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Undes. Chacra

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 32, T-28-N, R-8-W

N. M. P. M.

12. COUNTY OR PARISH

San Juan

13. STATE

N. M.

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

Box 289, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

800'S, 1575'W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6380' GL

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

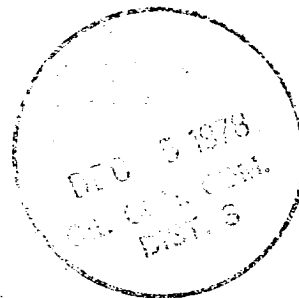
ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.)*

Please rescind the Application for Permit to Drill this location.



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

SIGNED

D. E. Grisco

TITLE

Drilling Clerk

DATE

11-30-78

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ah Esh

*See Instructions on Reverse Side

Sept. 10, 1974

30-245-21533

F. Loc. 300/S; 1475/W Elev. 5380 GL Spd. _____ Comp. _____ TD _____ PB _____

Casing S. _____ W _____ Sx. Int. _____ S _____ W _____ Sx. Pr. _____ S _____ W _____ Sx. T. _____ S _____
Csg. Perf. _____ Prod. Stim. _____

TRANS

B.O.D.		Hrs.		SICP		PSI After		Days GOR		Grav.		1st Del.		s		
I.P.		MCF/D After														
TOPS		NITD		Well Log		TEST DATA										
Kirtland		C-103		Plat		Schd.	PC	Q	PW	PD	D	Ref. No.				
Fruitland		C-104		Electric Log												
Pictured Cliffs				C-122												
Cliff House		Ditr		Dfa												
Menefee		Datr		Dac												
Point Lookout		<p>NWU-3-531</p> <p>145.37</p>														
Mancos																
Gallup																
Sanostee																
Greenhorn																
Dakota																
Morrison																
Entrada																

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