

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 well ☐ gas well ☒ other ☐
2. NAME OF OPERATOR
El Paso Natural Gas Company
3. ADDRESS OF OPERATOR
Box 289, Farmington, New Mexico
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1025'N , 1655 'W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input checked="" type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <input type="checkbox"/>	<input type="checkbox"/>

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.)*

3-24-80: TD 6703'. Ran 205 joints 4 1/2", 10.5# & 11.6# , J-55 production casing 6691' set at 6703'. Float collar set at 6689', stage tools set at 4972-2214'. Cemented 1st stage w/480 cu. ft. cement, 2nd stage w/ 679 cu. ft. cement, 3rd stage w/ 740 cu. ft. cement. WOC 18 hours. Top of cement at 750'.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED *A. D. Busco* TITLE Drilling Clerk DATE March 31, 1980

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

NMOCC

*See Instructions on Reverse Side

5. LEASE SF 077106	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Lackey B	
9. WELL NO. 13E	
10. FIELD OR WILDCAT NAME Basin Dakota	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20, T-28-N, R-9-W N.M.P.M.	
12. COUNTY OR PARISH San Juan	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 5835' GL	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)



ACCEPTED FOR RECORD

APR 3 1980

BY *M. L. Kuchera*