

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number SE-078919 EA100
2. Name of Operator El Paso Natural Gas Company	6. If Indian, All, or Tribe Name
3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name San Juan 29-7 Unit
4. Location of Well, Footage, Sec, T, R, M. 660'S, 660'W Sec.3, T-29-N, R-7 W, NMPM	8. Well Name & Number San Juan 29-7 Unit #11
	9. API Well No. 30-039-07681
	10. Field and Pool Blanco Mesa Verde
	11. County and State Rio Arriba Co., NM
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA	
Type of Submission	Type of Action
<input checked="" 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 checked="" 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

It is intended to locate by means of a packer and bridge plug, a leak in the 7" production casing. The leak is suspected to be within 500' of the surface. The well will be cemented from the original top of cement in the 7" casing annulus, at 3950', back to surface. This will cover all the exposed zones in the annulus, including the Fruitland Coal. We will then clean out the casing and put the Mesa Verde back on production.

A wellbore diagram is attached.

RECEIVED  
APR 04 1990  
OIL CON. DIV.  
DIST. 3

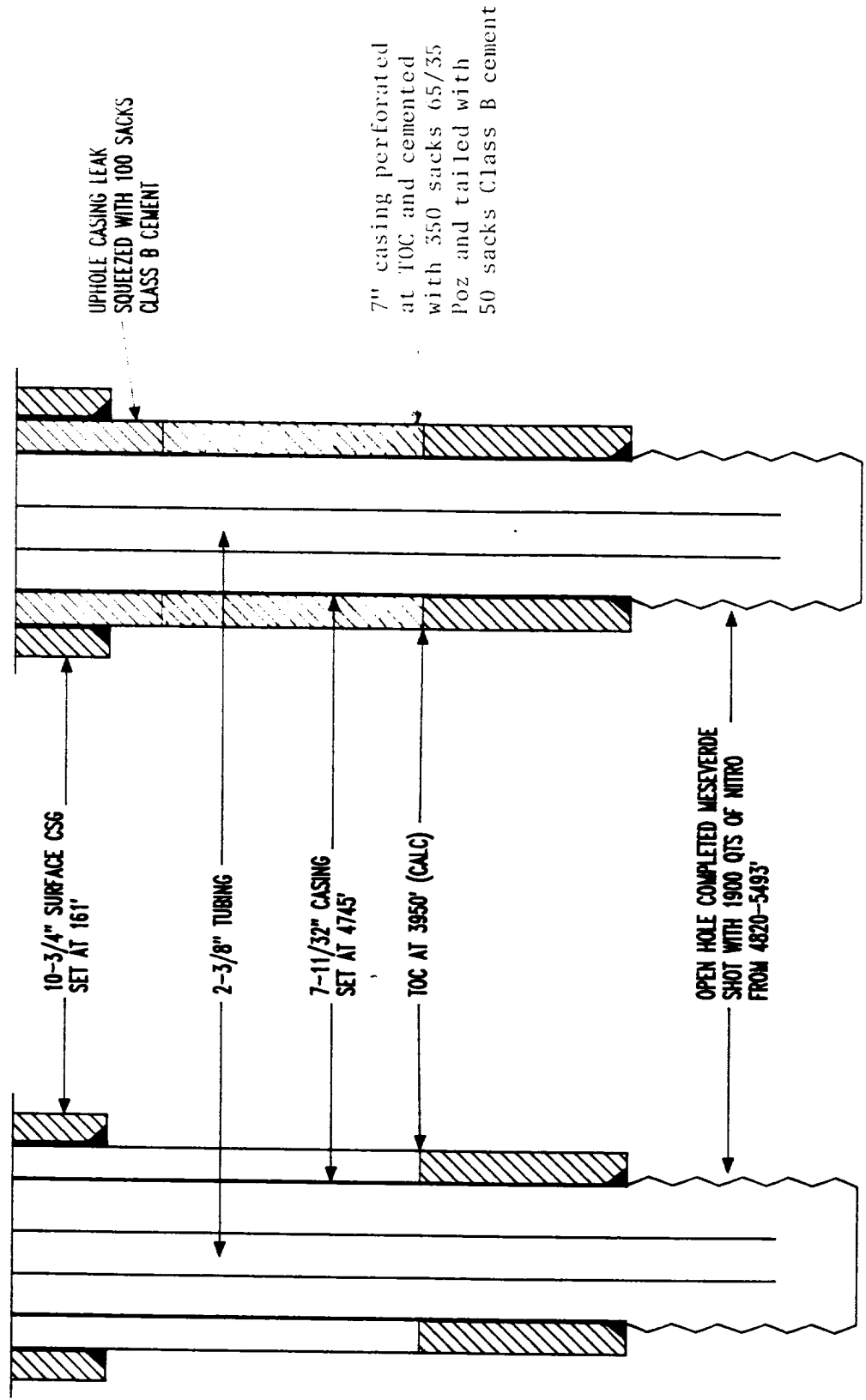
Approved **APR 02 1990**  
Chief, Branch of  
Mineral Resources  
Farmington Resource Area

14. I hereby certify that the foregoing is true and correct  
Signed [Signature] (LS) Title Regulatory Affairs Date 03-12-90

(This space for Federal or State office use)

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

# SAN JUAN 29-7 UNIT #11 UNIT M SECTION 3, T29N, R07W CASING REPAIR



PICTURED CLIFFS-3100'

LEWIS-3185'

CLIFF HOUSE-4735'

MENEFEE-4940'

POINT LOOKOUT-5220'

TD-5493'