UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side) **UNITED STATES**

Form approved.
Budget Hureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

SICAL SURVEY	SF 078	∂502
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GEOLOGICAL SURVEY			SIF 078502	
SUNDRY NO (Do not use this form for pro Use "APPL	DTICES AND REPORTS O posals to drill or to deepen or plug ba ICATION FOR PERMIT—" for such pro	N WELLS .ck to a different reservoir.	6. IF INDIAN, ALLOTTE	OR TRIBE NAME
OIL, GAS WELL OTHER			7. UNIT AGREEMENT NA	ME
WELL WELL OTHER 2. NAME OF OPERATOR			8. FARM OR LEASE NAM	(E
El Paso Natural Cas	El Paso Natural Cas Company		Vanderwart "A"	
3. ADDRESS OF OPERATOR			9. WELL NO.	
Box 990, Farmington,			1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		Blanco Mesa Verde 11. SEC., T., R., M., OR BLK. AND		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
	63≥:0' DF		San Juan	New Mexico
16. Check	Appropriate Box To Indicate No	ature of Notice, Report, or (Other Data	
NOTICE OF IN	TENTION TO:	SUBSEC	QUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING V	WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING C	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONME	
REPAIR WELL	CHANGE PLANS	(Other)		
	t Mesa Verde	(Note: Report result	s of multiple completion pletion Report and Log for	on Well
nent to this work.) *	operations (Clearly state all pertinent ctionally drilled, give subsurface location it is intended to we	ons and measured and true vertic	cal depths for all marker	s and zones perti-
Clean out old hole of approximately 5410' fun full string of 4 the 7" casing.	" annulus at the top of r whipstock and redrill 1/2" production casing ater frac the Mesa Verd	through the Mesa V	erde formation	
	ecessary to whipstock, e bottom of the 7" casi			
			RECEIV	ED
		MENED	AUG 171	965
		AUG 18 1965	U. S. GEOLOGICAL FARMINGTON, I	SURVEY N. M.

18. I hereby certify that the foregoing is true and correct Original signed by 8-17-65 DATE TITLE SIGNED Carl E. Matthews (This space for Federal or State office use) APPROVED BY ______CONDITIONS OF APPROVAL, IF ANY: TITLE DATE