Form 9-331 (May 1963)

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

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

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

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REPAIRING WELL

ALTERING CASING

ABANDONMENT*

BLM Land Use

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(Do not use this form	NOTICES AND REPORTS ON WELLS for proposals to drill or to deepen or plug back to a different remapped that to the proposals.	eservoir. Permit			
1. OIL GAS WELL WELL	OTHER Water Well	7. UNIT AGREEMENT NAME			
2. NAME OF OPERATOR		8. FARM OR LEASE NAME			
El Paso Natural 3. Address of Operator	Gas Company	Manzanares Mesa 9. WELL NO.			
P.O. Box 990, Fa. LOCATION OF WELL (Report See also space 17 below.) At surface	Water Well #1 10. FIELD AND POOL, OR WILDCAT				
	132' FSL, 1570' FWL	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 9, T29N, R8W NMPM			
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE			
	64921 GL	San Juan New Mexic			
16. C	Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data				
NOTICE	OF INTENTION TO:	SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	PULL OR ALTER CASING WATER SHUT	-OFF REPAIRING WELL X			

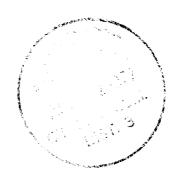
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

Replaced 15 H.P. submergible pump. Landed pump at 1050' on 2 3/8" tubing. 3-28-77



18.	I hereby certify that the foregoing is true and correct	TITLE Production Engineer	DATE3-29-77
-	(This space for Federal or State office use)		A STATE OF THE PARTY OF T
	APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE