

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF 078415-A
2. NAME OF OPERATOR El Paso Natural Gas Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 4289, Farmington, NM 87499		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 800'N 1700'W		8. FARM OR LEASE NAME Roelofs A
14. PERMIT NO.		9. WELL NO. 1A
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 6319' GL		10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliffs/ Blanco Mesa Verde
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10, T-29-N, R-8-W NMPM
		12. COUNTY OR PARISH San Juan
		13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)*

6-17-85 MOL & RU. Pulled tubing, set bridge plug at 3330'. Tested casing to 3500 psi-ok. Perf'd 3033-45, 3047-57, 3064-74, 3087-97. Frac'd w/ 42,000# 10/20 sand and 47,000 gallons treated water. Flushed w/5000 gallons water.

6-18-85 CO to PBTD. Set Baker Model F packer at 3186'. Ran 176 jts, 2 3/8" 4.7#, J-55 tubing set at 5571'. SN at 5539'. Ran 92 jts, 1 1/4", 2.4# J-55 tubing set at 3070'. SN set at 3036'. Rig released.

RECEIVED
JUL 02 1985
OIL CON. DIV.
DIST. 3

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

SIGNED Reggie Daah

TITLE Drilling Clerk

DATE 6-25-85

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD
DATE _____

JUN 28 1985

*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA

BY Smw