1. oil

well

below.)

AT SURFACE:

AT TOTAL DEPTH:

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

AT TOP PROD. INTERVAL:

gas

well

EL PASO NATURAL GAS CO.

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

5.	LEASE	
	SF	078 <b>416-A</b>

			- ;				
6.	IF IND	IAN,	ALLO	TTEE	OR TRI	BE NA	١M
			F 1	4	8	- :	

<del></del>			· · · · · · · · · · · · · · · · · · ·		
SUNDRY	<b>NOTICES</b>	AND	<b>REPORTS</b>	ON	<b>WELLS</b>
Do not use this foreservoir, Use Form				lug bac	k to a differ

other

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17

BOX 289, FARMINGTON, NEW MEXICO

800'N. 800'W

		_	- ::-		4.5	_
8.	<b>FARM</b>	OR I	EAS	ŝΕ	NAI	ИE
	Har	die	1.		٠,,٠	

7. UNIT AGREEMENT NAME:

9. WELL NO. 5A

10. FIELD OR WILDCAT NAME Blanco Mesa Verde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T-29-N, R-8-W

12. COUNTY OR PARISH 13. STATE
San Juan New Mexico
14. API NO.

OTICE,

15. ELEVATIONS (SHOW DF, KDB, AND WD)  $6735~\mathrm{GL}$ 

팔람

16. CHECK APPROPRIATE REPORT, OR OTHER I		то	INDICATE	NATURE	OF	NOTICE
REQUEST FOR APPROVAL TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)	<b>TO:</b>		SUBSEQ	UENT RE	POR	T OF:

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

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.)\*

12/10/78: TD 3691'. Ran 91 joints 7", 20#, K-55 intermediate casing, 3680' set at 3691'. Cemented with 306 cu. ft. cement. WOC 12 hours; held 1200#/30 minutes. Top of cement at 2300'.

12/14/78: T.D. 6003'. Ran 77 joints 4 1/2'', 10.5#, K-55 casing liner, 2497' set 3505'-6003'. Float collar set at 5987'. Cemented w/438 cu. ft. cement. WOC 18 hours.

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

SIGNED D. Duces TITLE Drilling Clerk DATE 1/24/79

(This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY

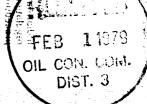
TITLE

DATE

Parallel (Parallel Parallel Pa

\*See Instructions on Reverse Side

nymocc



West and