

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM012694

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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	7. UNIT AGREEMENT NAME San Juan 30-6 Unit
2. NAME OF OPERATOR El Paso Natural Gas Company	8. FARM OR LEASE NAME San Juan 30-6 Unit
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, NM 87401	9. WELL NO. 83 (OWWO)
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 700'N, 950'E	10. FIELD AND POOL, OR WILDCAT Blanco MV
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15, T-30-N, R-7-W N.M.P.M.
15. ELEVATIONS (Show whether DE, RT, GR, etc.) 6203' GL	12. COUNTY OR PARISH Rio Arriba
	13. STATE New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Squeeze, Case Cement & Perf</u> <input checked="" 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.) *

11-20-75 Pulled tubing.

11-21-75 Set 7" cement retainer at 4765' and squeezed open hole with 239 cu. ft. cement. WOC.

11-22-75 Drilled retainer at 4765' and started sidetrack hole.

11-25-75 TD 5685'. Ran 136 joints 4 1/2", 10.5#, K-55 production casing, 5676' set at 5685'. Cemented with 217 cu. ft. cement. Float collar set at 5668'. Cemented with 217 cu. ft. cement. Float collar set at 5668'. WOC 18 hours. Top of cement at 2700'.

11-29-75 PBTD 5668'. Tested casing to 4000#, OK. Perf'd 5366', 5383', 5390', 5404', 5440', 5450', 5460', 5474', 5534', 5560', 5583', 5606', 5637' with 1 shot per zone. Frac'd with 100,000#--20/40 sand and 100,000 gallons water. No ball sets dropped. Flushed with 3700 gallons water.

11-30-75 Perf'd 4985', 5004', 5054', 5080', 5184', 5198', 5291', 5308' with 1 shot per zone. Frac'd with 78,000#--20/40 sand and 78,000 gallons water. No ball sets dropped. Flushed with 3320 gallons water.

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

SIGNED A. G. BuacoTITLE Drilling ClerkDATE December 19, 1975

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side