

**DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

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 ☐ GAS WELL ☒ OTHER 2. NAME OF OPERATOR <u>El Paso Natural Gas Company</u> 3. ADDRESS OF OPERATOR <u>P.O. Box 4289, Farmington, NM 87499</u> 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <u>945'N, 1130'E</u> At surface 14. PERMIT NO. _____	5. OF INDIAN, ALLOTTEE OR TRIBE NAME <u>SF-084809A 080180-A</u> 7. UNIT AGREEMENT NAME <u>San Juan 30-6 Unit</u> 8. FARM OR LEASE NAME <u>San Juan 30-6 Unit</u> 9. WELL NO. <u>441</u> 10. FIELD AND POOL, OR WILDCAT <u>Basin Fruitland Coa.</u> 11. SEC. T. R. M. OR S.E. AND SURVEY OR AREA <u>Sec.31, T30N, R6W</u> <u>NMPM</u> 12. COUNTY OR PARISH 13. STATE <u>Rio Arriba</u> <u>NM</u>
15. ELEVATIONS (Show whether OF, AT, OR ABL.) <u>6842'GL</u>	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Revision ☒

RELL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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.) *

Attached is a copy of the C102 showing the revised pool & dedication.

RECEIVED

DEC 28 1988

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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

SIGNED

TITLE Regulatory Affairs

DATE 12-22-88

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL IF ANY:

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NIMOC

NEW MEXICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-100
Supersedes C-938
Effective 1-4-88

All distances must be from the outer boundaries of the Section.

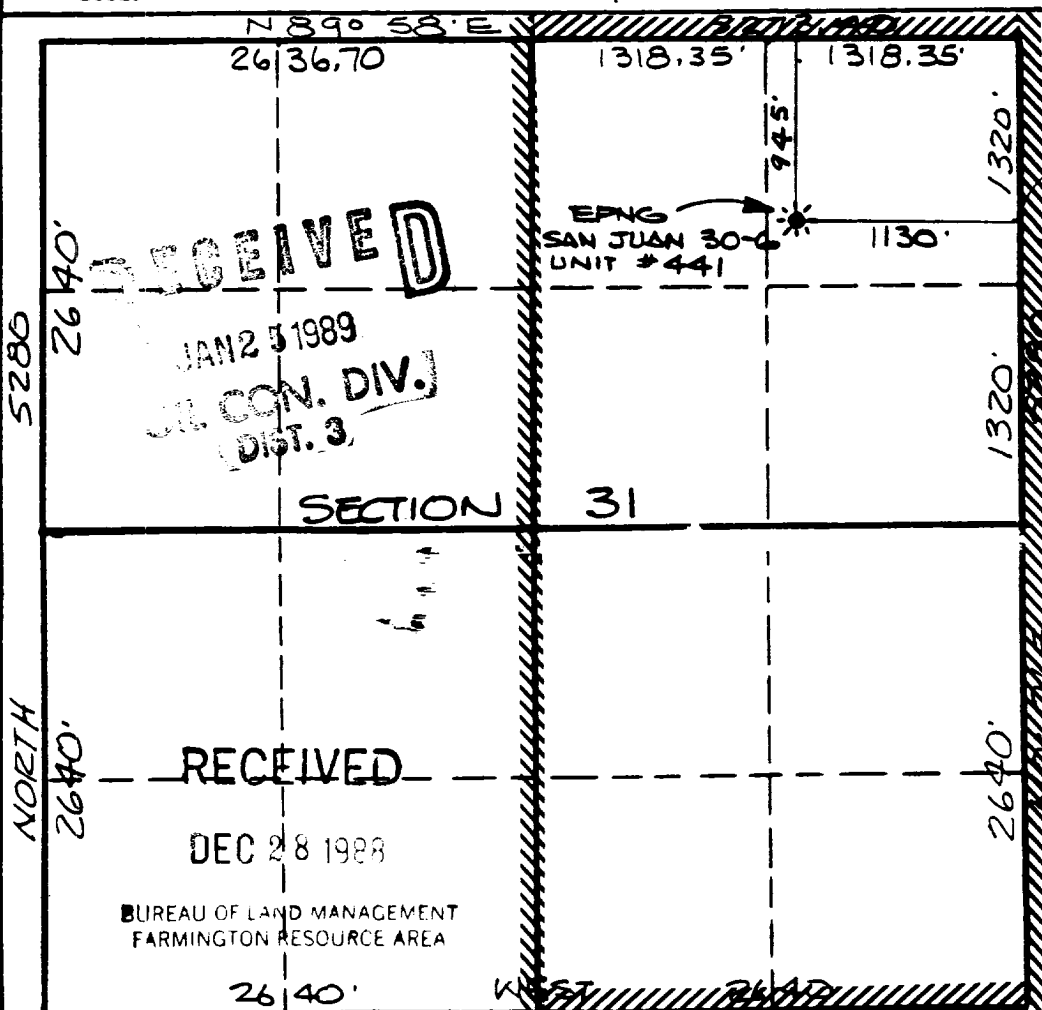
Operator El Paso Natural Gas Company			Lease SAN JUAN 30-6 Unit (SF-080180A) 441		Well No. 441
Unit Letter A	Section 31	Township 30 NORTH	Range 6 WEST	County RIO ARriba	
Actual Footage Location of Well					
945 feet from the NORTH line and		1130 feet from the EAST line			
Ground Level Elev. 6842	Producing Formation Fruitland Coal	Pay' Basin		Dedicated Acreage 320 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Unitization

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

[Signature]

Name
Drilling Clerk

Position
El Paso Natural Gas Co..

Company
12-22-88

Date

I hereby certify that the information shown on this plat was plotted from field notes of a duly licensed surveyor, and that the same is true and correct to the best of my knowledge.

[Signature]

Date Surveyed

APRIL 30, 1988

Registered Professional Engineer
and/or Land Surveyor

NEALE C. EDWARDS

Certificate No.
6857