

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 <input type="checkbox"/> 2. NAME OF OPERATOR El Paso Natural Gas Co. 3. ADDRESS OF OPERATOR PO Box 990, Farmington, New Mexico 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 850 N, 1800 W, Sec. 20-T-30-N, R-9-W 14. PERMIT NO.		5. LEASE DESIGNATION AND SERIAL NO. 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME Florance 9. WELL NO. 8 10. FIELD AND POOL, OR WILDCAT Blanco PC 11. SEC., T. R., M., OR BLK. AND SURVEY OR AREA 850N, 1800W, Sec. 20-30-9 12. COUNTY OR PARISH 13. STATE San Juan New Mexico
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6072' GL		

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

NOTICE OF INTENTION TO:

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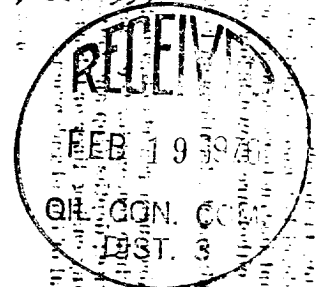
SUBSEQUENT REPORT OF:

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

2-9-70 to installed 86 jts. tubing and 2 pup jts. 1 1/4", 2.33 lbs., JCW-55; non-upset IJ 10R (2769.95') set at 2779.95'.



FEB 19 1970

GEOLOGICAL SURVEY

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

SIGNED J.P. Grant **TITLE** Production Engineer

DATE 2-9-70

(This space for Federal or State office use)

APPROVED BY _____ **TITLE** _____

CONDITIONS OF APPROVAL, IF ANY:

DATE

*See Instructions on Reverse Side