PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

| Form 9–331<br>Dec. 1973  | Form Approved.<br>Budget Bureau No. 42–R1424                                   |  |  |
|--|--|--|--|
| UNITED STATES DEPARTMENT OF THE INTERIOR   | 5. LEASE<br>SF 078200B   |  |  |
| GEOLOGICAL SURVEY  | 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  | 7. UNIT AGREEMENT NAME   |  |  |
| reservoir. Use Form 9–331–C for such proposals.)  1. oil gas   | 8. FARM OR LEASE NAME Riddle B   |  |  |
| well well other  2. NAME OF OPERATOR   | 9. WELL NO. 8  |  |  |
| El Paso Natural Gas Company  3. ADDRESS OF OPERATOR  | 10. FIELD OR WILDCAT NAME Blanco Pictured Cliffs Ext                           |  |  |
| PO Box 4289, Farmington, NM 87499  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  1800'S, 990'E   | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  Sec. 23, T-30-N, R-10-W, NMP |  |  |
| AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH:   | 12. COUNTY OR PARISH 13. STATE San Juan NM                                     |  |  |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  | 14. API NÖ.  |  |  |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT   | FLEVITIONS (SHOW DF, KDB, AND WD)  |  |  |
| REQUEST FOR APPROVAL TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL  SUBSEQUENT REPORT REPORT SUBSEQUENT REPORT REPORT SUBSEQUENT SUBSEQUENT REPORT SUBSEQUENT SUBSEQUENT SUBSEQUENT SUBSEQUENT SUBSEQUENT SUBSEQUENT SUBSEQUENT | (NOTEN Sport results of multiple completion or zone                            |  |  |

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.)\*

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It is intended to repair the casing failure by pulling the tubing and packer, setting a sand plug across the perforations, isolating the leak, and squeeze cementing the leak with a sufficient amount of cement to repair the failure. Following clean out, the casing will be tested to 750 psig the sand plug cleaned out and the production tubing reran.



OIL CON DIV

| Subsurface Safety Valve: Manu. and Type       |                                 | DIST. 3  | Set @  | 2. 15 G                                 |
|---|---------------------------------|----------|--|---|
| 18. I hereby certify that the jolegoing is tr | ue and correct                  |          | 10 mm  | 01 ;                                    |
| SIGNED JAM W Jum                              | Project Drilling                | DATE     |  |   |
|   | (This space for Federal or Stat |          |  | -6-83 <u></u>                           |
| APPROVED BY                                   | TITLE                           | DATE     | 1 6  | > 1                                     |
| Jan Jaluu                                     |                                 |          | Ve type  | 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 |
| To find the second                            |                                 |          | The state of the s | 1 00 00 1<br>1 00 00 1<br>1 00 00 1     |
| LAUTHOT SYSTAMER                              | *See Instructions on Reve       | rse Side | *  |   |