

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved:
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM 03195

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 ☐ GAS WELL ☒ OTHER ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME Sunray H	
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401		9. WELL NO. 5	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 825'S, 1500'E		10. FIELD AND POOL, OR VICINITY Blanco Pictured Cliffs Ext.	
14. PERMIT NO.		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 11, T-30-N, R-10-W NMPM	
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 6664'GL		12. COUNTY OR PARISH San Juan	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other)	☐		☐

SUBSEQUENT REPORT OF:

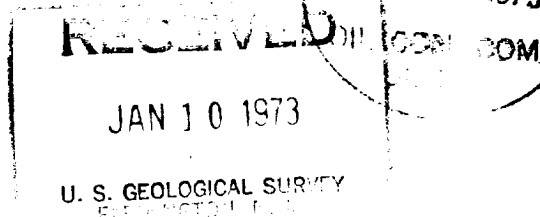
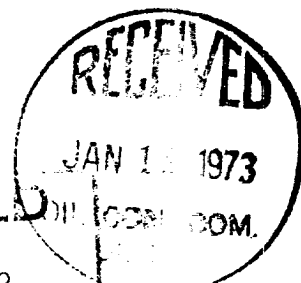
WATER SHUT-OFF	☒	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(Other)	☐		☐

(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.)*

1-5-73

Spudded well. Drilled surface hole. Ran 4 joints 8 5/8", 24#, KS surface casing, 127' set at 138'. Cemented with 129 cu. ft. cement, circulated to surface. WOC 12 hours, held 600#/30 min.



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

SIGNED 46/2002 TITLE Petroleum Engineer DATE January 9, 1973

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: