Form 9-331 (May 1963)	DEPART	UNITED STATMENT OF THE	E INTERI	OR (Other instructions verse side)	on re-	Form approv Budget Bures LEASE DESIGNATION SF078387	au No. 42	
SUI (Do not use thi	NDRY NOT	ICES AND RE	EPORTS (ON WELLS pack to a different reservoir. roposals.)		. IF INDIAN, ALLOTTE		E NAME
1. OIL GAS WELL WELL	X OTHER				'	. CNIT AGREEMENT NA	(NE IN	
2. NAME OF OPERATOR El Paso Natural Gas Company						8. FARM OR LEASE NAME HOWELL D		
3. ADDRESS OF OPERATOR						9. WELL NO.		
P. O. Box 990, Farmington, NM 87401						2A 10. FIELD AND FOOL, OR WILDCAT		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface						Blanco Mesa Verde		
1500'N, 1660'W						Sec. 29, 1-31-N, R-8-W N.M.P.M.		
14. PERMIT NO.		15. ELEVATIONS (S	how whether DI 6524' GI		1	12. county or parise San Juan		Mexico
16.	Check A	ppropriate Box To	o Indicate N	Nature of Notice, Repo	rt, or Oth	ner Data		
	NOTICE OF INTE	NTION TO:			BUBSEQUEN	T REPORT OF:	٦	
TEST WATER SHUT	-OFF	PULL OR ALTER CASIS		WATER SHUT-OFF FRACTURE TREATMEN	T X	REPAIRING ALTERING (-	
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZ	ING	ABANDONME	NT*	
REPAIR WELL (Other)		CHANGE PLANS		(Other)(Note: Report	t results of	multiple completion on Report and Log for	on Well	
proposed work, nent to this work	If well is direct	ionally urilled, give a	subsurface low	ot details, and give pertiner tions and measured and tru	nt dates, in le vertical	icluding estimated da depths for all marke	te of star rs and zor	rting any nes perti-
06-04-75	r Ran 5 ioin	11. Drilled ts 9 5/8", 32 u. ft. cement	2.3#. K-:	55 surface casing alated to surface	, 200' . WOC	set at 200' 12 hours.	GL.	Cemented
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		ř.		-014	JUI	V 1 8 1975		
		<i>\frac{1}{2}</i>	WE CON	3	U. 8. (* †	a supply and say.		
		*,	Dist	. • /				
18. I hereby certify the	nat the foregoing	is true and correct	TITLE	Drilling Clerk		J	une 10	6, 1975
(This space for F	ederal or State o	ffice use)						
	· · · ·		TITLE			DATE		
APPROVED BY _ CONDITIONS OF	APPROVAL, IF	ANY:						