Form 3160-5

TEST WATER SHUT-OFF

FRACTURE TREAT

PULL OR ALTER CASING

MULTIPLE COMPLETE

form approved.

(November 1983)	UNITED STATES SUBMIT IN TRIPLICA	TE• Dureau No. 1004-0135
(Formerly 9-331)	DEPARTMENT OF THE INTERIOR (Other Instructions on	re Expires August 31, 1085 5. LEASE DESIGNATION AND SERIAL NO.
	BUREAU OF LAND MANAGEMENT	1 1
		SF 078336C
(Do not use thi	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
OIL GAS WELL WELL	OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR		8. FARM OR LEASE NAME
	Lindsey	
3. ADDRESS OF OPERATO	El Paso Natural Gas Company	9. WELL NO.
	Post Office Box 4289, Farmington, NM 87499	2
4. LOCATION OF WELL (See also space 17 bel	10. FIELD AND POOL, OR WILDCAT	
At surface	Blanco Pic.Cliffs	
		11. SEC., T., B., M., OR BLE. AND SURVEY OR AREA
		Sec.11, T-30-N, R-09-W
14. PERMIT NO.	•	N.M.P.M.
IV. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	5894'GL	San Juan NM
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or	Other Data
3	NOTICE OF INTENTION TO:	

ALTERING CASING SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDON MENT REPAIR WELL CHANGE PLANS Spud (Other) (Norz: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) 17. DESCRIBE PROPUSED 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.)

Spudded well at 5:00 p.m. 8-17-85. Drilled to 234'. Ran 5 jts. 85/8", 24.04, K-55 surface casing set at 234'. Cemented with 125 sks. Class "B" with 1/44/sk. gel-flake and 8-17-85 3% calcium chloride (148 cu.ft.). Circulated to surface. WOC 12 hours. Tested 600#/30 minutes, held ok.

WATER SHUT-OFF

SUBSEQUENT REPORT OF:

REPAIRING WELT.

AUG 2 3 1985

OIL CON. DIV. DIST. 3

18. I hereby certify that the foregoing is true a		
SIGNED Jeggy Con	TITLE Drilling Clerk	В-21-85
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	ACCEPTED FOR RECORD
		ATT 1985
	*See Instructions on Reverse Side	FARMINGTON RESOURCE AREA

Title IS 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 faise, fictitious or fraudulent statements or representations as to any mark

Form 3160-5 (November 1983)	UN	ITED STATES	SUBMIT IN TRIPLICAT	Budget Bureau No. 1004-013:
(Formerly 9-331)	DEPARTMEN	NT OF THE INTERIO	R (Other instructions on verse side)	re Expires August 31, 1085 5. LEASE DESIGNATION AND SERIAL NO.
	BUREAU O	F LAND MANAGEMENT		SF 078336C
SII	NDRY NOTICE	S AND REPORTS OF	V WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use th	is form for proposals t	o drill or to deepen or plug hac	t to a different reservoir	
1.	Use "APPLICATION	FOR PERMIT—" for such prop	osais.)	
OIL GAS WELL	OTHER	•	4	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	V 2 011121			8. FARM OR LEASE NAME
	El Paso Nat	ural Gas Company		Lindsey
3. ADDRESS OF OPERAT	OR	•	20	9. WELL NO.
	Post Office	Box 4289 Farmin	gtom AM 87499	3
See also space 17 be At surface		and in accordance with any Sta	g top MNB7499 To Cau Smelits.	10. FIELD AND POOL, OR WILDCAT
	1160'S, 118	0'E R	AUG 21 1985	Blanco Pic.Cliffs
		•	AUG 12 T . CEMEN	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
			MO MANAGE ARE	Sec.11, T-30-N, R-09-1
14. PERMIT NO.	15.	ELEVATIONS (Show whether DF, RT,	SEER OF LAND SOUTH	N.M.P.M. 12. COUNTY OR PARISH 13. STATE
		5894 8	ARMINGTO:	San Juan NM
16.	Check Appropri	ELEVATIONS (Show whether DF, RT, 5894	(NI D	O. D.
	NOTICE OF INTENTION T	riate Box To Indicate Nati	re of Notice, Keport, or	Other Data
		φ: ¹	BUBBE	QUENT REPORT OF:
TEST WATER SHUT-O	PCLL O	R ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT SHOOT OR ACIDIZE	11	LE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
REPAIR WELL	- ABANDO CHANGE	[SHOOTING OR ACIDIZING	ABANDONMENT®
(Other)	Change	-	(NOTE: Report result	pud Well s of multiple completion on Well
17. PLSCRIBE PROPUSED OF	R COMPLETED OPERATION	s (Clearly state all pertinent de	The state of the s	oletion Report and Log form.) including estimated date of starting any rai depths for all markers and zones perti-
	Cemented 3% calci		lass "B" with l cu.ft.). Circ	/4#/sk. gel-flake and ulated to surface.
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••	** ** \$ *	*	ID)	ECEPTEM
			INS .	
			4 4	AUG 2 7 1005
				AUG 2 3 1985
		• •	011	CON. DIV.
				DIST. 3
				2101, 9
	•			
		•		
I hereby certify that t	he foregoing is true an	d correct		
SIGNED 199	y Ca	L TITLE Drill	ing Clerk	8-21-85
(This space for Federa	i or State office peak			ACCEPTED FOR RECORD
	- II Danie James use)			1100
APPROVED BY	ROVAL, IF ANY	TITLE		DATE
				1000
				FARMINGTON MECODINE MEA
		*See Instructions on R	everse Side	FARMINATON NECOUNCE MEA
		*See Instructions on R		FARMINGION NECOCIOE INCEA