

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-11424.
5. LEASE DESIGNATION AND SERIAL NO.

SF- 078509

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company		San Juan 32-9 Unit	
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, New Mexico 87401		8. FARM OR LEASE NAME San Juan 32-9 Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 990'South, 990'West		9. WELL NO. 32	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6775' GL	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 31, T-32-N, R-9-W N.M.P.M.	
		12. COUNTY OR PARISH San Juan	
		13. STATE New Mexico	

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>			
(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.)*			

It is intended to P & A the subject well due to non-productivity in the following manner:

1. Rig up, pick up tubing workstring, circulate the hole.
2. Spot a 40 sack cement plug at the top of the Pictured Cliffs formation.
3. Determine the free point of the casing by stretch method. If casing is free below the base of the Ojo Alamo (2918) shoot above the free point & recover.
4. Spot a 70 sack cement plug in the open hole section on the casing stub.
5. If the casing is not free below the base of the Ojo Alamo. Perforate, squeeze holes at 2980'. Spot a 60 sack cement plug above the squeeze holes. Pressure displace 20 sacks of cement into the formation.
6. Short off casing above the free point and recover.
7. Spot a 70 sack cement plug in the open hole section on the casing stub.
8. Spot a 70 sack cement plug below the base of the surface casing.
9. Place a 10 sack cement plug at the surface, install a dry hole marker and clean-up the location.

RECEIVED
SEP 22 1976
U. S. GEOLOGICAL SURVEY

18. I hereby certify that the foregoing is true and correct
SIGNED A. G. Buices TITLE Drilling Clerk DATE September 21, 1976
(This space for Federal or State office use)

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

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*See Instructions on Reverse Side