

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ well ☐ gas ☒ well ☐ other

2. NAME OF OPERATOR
El Paso Natural Gas

3. ADDRESS OF OPERATOR
P.O. Box 289, Farmington

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 800'S, 1736'W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☒
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON ☐

(other) *Progress Rpt*

SUBSEQUENT REPORT OF:

☐
☐
☐
☒
☐
☐
☐
☐

RECEIVED

AUG 04 1982

U.S. GEOLOGICAL SURVEY
FARMINGTON, N.M.

5. LEASE
SF 078039

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Barnes

9. WELL NO.
10

10. FIELD OR WILDCAT NAME
Blanco PC

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 22, T-32-N, R-11-W, NMPM

12. COUNTY OR PARISH
San Juan

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6471' GL

NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

7-28-82 Ran 96 jt of 1 1/4" 2.33# IJ tubing (3085.18') set at 3095.18' with 2 7/8" Baker Model C-1 packer on the bottom, to isolate a suspected casing leak.



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED *Loren W. Fathergill* TITLE *Sr. Prod. Engineer* DATE *August 3, 1982*

ACCEPTED FOR RECORD

(Use for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: *AUG 13 1982*

FARMINGTON DISTRICT

BY *R. Du*

See Instructions on Reverse Side

NMOCC