UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Sundry Notices and Rep	orts on Wells
1. Type of Well GAS	5. Lease Number SF-081155 6. If Indian, All.or Tribe Name
2. Name of Operator El Paso Natural Gas Company	7. Unit Agreement Name Allison Unit
3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505)	8. Well Name & Number Allison Unit #119 326-9700 9. API Well No.
4. Location of Well, Footage, Sec, T, R, M. 1595'S, 1765'W Sec. 29, T-32-N, R-6-W,	NMPM Basin Fruitland Coal 11.County and State San Juan County, NM
X Subsequent Report — Recomp	JRE OF NOTICE, REPORT, OTHER DATA Type of Action ment Change of Plans letion New Construction ng Back Non-Routine Fracturing Repair Water Shut Off ng Casing Conversion to Injection
13. Describe Proposed or Completed Operation	ations
w/nunge valve 1 it 2 3/8" t	rods as follows: x 16' insert pump 16' 2' 2900' 12' APR 0 9 1990 8' 1 1/2"liner 22' OIL CON. DIV
14. I hereby certify that the foregoin Signed Manager Title Re	g is true and correct gulatory Affairs Date 3-21-9
(This space for Federal or State office	use) ACCEPTED FOR RECORD
RELICOVID DI	APR# 1990
CONDITION OF APPROVAL, IF ANY:	FARMINGTON RESOURCE AREA