

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
SF-078459B

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 ☐ GAS WELL ☒ OTHER Acidize
2. NAME OF OPERATOR El Paso Natural Gas Company
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface 1080'S, 790'W

7. UNIT AGREEMENT NAME
Allison Unit

8. FARM OR LEASE NAME
Allison Unit

9. WELL NO.
127

10. FIELD AND POOL, OR WILDCAT
Basin Fruitland Coal

11. SEC., T., S., M., OR B.L. AND
SURVEY OR AREA
Sec. 14, T-32-N, R-7 -W
N.M.P.M.

14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, OR, etc.)
6829' GL

12. COUNTY OR PARISH
San Juan
13. STATE
NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(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.)*

11-18-88 Spudded well at 7:00 pm 11-18-88. Drilled to 241'. Ran 5 jts. 9 5/8", 32.3#, H-40 surface casing set at 241'. Cemented with 150 sks. Class "B" with 1/4#/sk. gel-flake and 3% calcium chloride (177 cu.ft.). circulated to surface. WOC 12 hrs. Tested 600#/30 minutes, held ok.

11-22-88 TD 3404'. Ran 78 jts. 7", 20.0#, K-55 intermediate casing, 3392' set @ 3404'. Cemented with 520 sks. Class "B" 65/35 with 6% gel, 2% calcium chloride, 1/2 cu.ft. perlite/sx (1092 cu.ft.), followed by 100 sx. Class "B" with 2% calcium chloride (118 cu.ft.). WOC 12 hours. Held 1200#/30 min. Circulated to surface.

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

SIGNED [Signature] TITLE Regulatory Affairs

DATE 11-23-88

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side