Form Approved.

UNITED STATES DEPARTMENT OF THE INTERIOR

	Budget Bureau No. 42-R1424					
ĺ	5.	LEASE				
		SF 078097				
	6.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME				
	7. UNIT AGREEMENT NAME					
t 	8.	FARM OR LEASE NAME				
		Zachary				
	9.	WELL NO.				
į		#1				
	10.	FIELD OR WILDCAT NAME				
		Blanco MV				
_	11.	SEC., T., R., M., OR BLK. AND SURVEY OR AREA				
		SW/ Section 25, T-31-N, R-11-				
W	12.	COUNTY OR PARISH 13. STATE				
		San Juan New Mexico				
	14.	API NO.				
	15.	ELEVATIONS (SHOW DF, KDB, AND WD)				

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 difference reservoir. Use Form 9-331-C for such proposals.) 1. oil gas X other well well 2. NAME OF OPERATOR El Paso Natural Gas Company 3. ADDRESS OF OPERATOR P.O. Box 4289, Farmington, NM 87499-4289 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1604'S, 1630'W, Sec. 25, 31N, R11 AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL OCT 5 (NOT) Speport red Word multiple completions zon PULL OR ALTER CASING MULTIPLE COMPLETE BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREAOIL CON. DIV. CHANGE ZONES ABANDON* (other) 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.)* Follow up report: At 4 day entervals the bottom hole pressure builds up enough to unload the well for thirty minutes. This condition is an improvement; however, more time will be required to clean up the flooded producing zone. It is requested that another extention be granted so that we may continue to work with the well to return it to producing status. Lender until March 11,1984 Subsurface Safety Valve: Manu. and Type ___ 18. I hereby certify that the foregoing is true and correct Production Engineer DATE October 4, 1983 2400 TITLE. (This space for Federal or State office use DATE APPROVED APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Form 3160-5 Formerly 9-331)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT		Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 LEASE DESIGNATION AND SERIAL NO. SF 078097	_
SU (Do not use th	NDRY NOTICES AND REPORTS Couls form for proposals to drill or to deepen or plug band use "APPLICATION FOR PERMIT—" for such pro-	ON WELLS ack to a different reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	<u>.</u>
OIL GAS WELL WELL	, X OTHER		7. UNIT AGREEMENT NAME	_
2. NAME OF OPERATOR			8. FARM OR LEASE NAME	_
El Paso N	atural Gas Company		Zachary	
3. ADDRESS OF OPERAT			9. WBLL NO.	_
P.O. Box	4289, Farmington, NM 87499-4289	9	#1	
4. LOCATION OF WELL	(Report location clearly and in accordance with any S		10. FIELD AND POOL, OR WILDCAT	
See also space 17 t At surface	elow.)	CEIVED	Diames Mass W. I.	
	630'W, Sec. 25, T-31-N, R-11-W		Blanco Mesa Verde 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
100. 0, 1	200 m, 200 20, 1 01 m, K 11 m	10 T V 10 T V 3		
14. PERMIT NO.	15. ELEVATIONS (Show whether DE	ST-OR eta la companya ADEA	SW, Sec. 25, T-31-N,	_R-11-
	5869' DF	CHURTERSOUNCE SEEA		_
	3009 DF		San Juan New Mex	xico
16.	Check Appropriate Box To Indicate No	ature of Notice, Report, or C	Other Data	
	NOTICE OF INTENTION TO:	SUBSEQU	ENT REPORT OF:	
		v		
TEST WATER SHUT		WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*	
REPAIR WELL	CHANGE PLANS	(Other)	of multiple completion on Well	
(Other)		Completion or Recomple	of multiple completion on Well etion Report and Log form.)	_
17. DESCRIBE PROPOSED proposed work, nent to this work	OR COMPLETED OPERATIONS (Clearly state all pertinent If well is directionally drilled, give subsurface location).	details, and give pertinent dates, ons and measured and crue vertica	including estimated date of starting and depths for all markers and gones perti	iy ii-
Fol1	ow up report:			
inte zone	The well is unloaded every other past 2 weeks with it bearly mark rvals. This is an improvement; needs more cleaning up, which we evaluation.	king the chart betwee however, the flooded	n stopcock producing	
cont	It is requested that another exinue to improve the producing st		o that we may	
	Likus	led to Ane 36	PEGENVE DI NAR 15 1984 DIV OIL CON. 3	

NMOUCO
*See Instructions on Reverse Side