Point	9-331
(MLY	1963

UNITED STATES

SUBMIT IN TRIPLICATE (Other instructions on re-

 Budget	Pare	eu. cu N	o. 42 -	R142
DESIGN		\mathbf{AND}	HERIA.	L NO.

	MENT OF THE INTERIOR verse side) GEOLOGICAL SURVEY	SF078840
(Do not use this form for propo-	ICES AND REPORTS ON WELLS sais to drill or to deepen or plug back to a different reservoir. ATION FOR PERMIT—" for such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS OTHER		7. UNIT AGREEMENT NAME San Juan 28-7 Unit
2. NAME OF OPERATOR El Paso Natural Gas C	San Juan 28-7 Unit	
P. O. Box 990, Farming		9. WELL NO. 205
4. LOCATION OF WELL (Report location of See also space 17 below.) At surface 950'S, 1750'E	learly and in accordance with any State requirements.	10. FIELD AND POOL, OR WILDCAT Largo Chacra 11: SEC., T., E., M., OR BLK. AND SURVEY OR AREA SCC. 18, T-27-N, R-7-V N.M.P.M.
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6586	12. COUNTY OR PARISH 13. STATE Rio Arriba New Mexico
16. Chark A	parapriate Box To Indicate Nature of Notice, Report, o	r Other Data

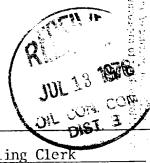
Check Appropriate	Box To	Indicate	Nature of	Notice,	Report, or	Other	Data
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NOTI	CE OF INTE	ENTION TO:	BUB!	REQUERT REPORT		
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)		PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report res Completion or Reco	ults of multiple	REPAIRING WELL. ALTERING CASING ABANDONMENT* completion on Welt and Log form.)	
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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.) *

07-01-76 Spudded well. Drilled surface hole.

07-02-76 Ran 3 joints 8 5/8", 24#, KE surface casing, 130' set at 140'. WOC 12 hours; held 600#/ with 106 cu. ft. cement. Circulated to surface. 30 minutes.



18. I hereby certify that the foregoing is true and correct SIGNED		illing Clerk	DATE July 9, 1976
(This space for Federal or State office use)		<u> </u>	
APPROVED BY	TITLE		DATE
CONDITIONS OF APPROVAL, IF ANY:	11/	Marian See	ရည်းကျွန်းသည်။ ကြွန်းကျွန်းသည်။

*See Instructions on Reverse Side