

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 S-331-C for such proposals.)

1. oil ☐ well ☐ gas ☒ well ☐ other

2. NAME OF OPERATOR
Northwest Exploration Company

3. ADDRESS OF OPERATOR
P.O. Box 5800, T.A., Denver, CO 80217

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1160' FEL & 930' FSL

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

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) Well Status

SUBSEQUENT REPORT OF:

RECEIVED
NOV 8 1983
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

5. LEASE

NM 25804

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Natani

9. WELL NO.

#1

10. FIELD OR WILDCAT NAME

Undesignated Rusty Chacra

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 11 T21N R6W

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mexico

14. API NO.

30-043-20429

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6985' GR

(NOTE: Report results of multiple completion or zone change on Form S-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.)*

This is to inform you that the pit has been filled, recontoured and reseeded per BLM specifications. This Sundry Notice supersedes Sundry Notice dated 9-19-83.

RECEIVED
NOV 28 1983
OIL CON. DIV.
DIST. 3

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

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

SIGNED Sally L. Duvall TITLE Regulatory Compliance DATE 11-9-83
Coordinator

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NOV 23 1983

NMOCOA

FARMINGTON RESOURCE AREA

BY Sally L. Duvall