

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 9-331-C for such proposals.)

1. oil ☐ gas ☒ 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: 800' FNL & 1800' FWL  
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) ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☒

RECEIVED  
SEP 27 1983

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE  
NM 17007  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Natani  
9. WELL NO.  
#10  
10. FIELD OR WILDCAT NAME  
~~Undesignated~~ Rusty Chacra  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 14 T21N R6W  
12. COUNTY OR PARISH  
Sandoval  
13. STATE  
New Mexico  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6928' KB

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 well has been reclaimed and reseeded per B.L.M. specifications, and is now ready for inspection.

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SEP 29 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 Coordinator DATE 9-19-83

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 28 1983

FARMINGTON RESOURCE AREA  
BY SEP

\*See Instructions on Reverse Side

NMOCC