

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 080379-A

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME San Juan 29-6 Unit	
2. NAME OF OPERATOR Northwest Pipeline Corporation		8. FARM OR LEASE NAME San Juan 29-6 Unit	
3. ADDRESS OF OPERATOR P.O. Box 90 Farnington, New Mexico 87401		9. WELL NO. 19	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 940' FNL & 1825' FEL		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8, T29N, R6W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6773' GR		12. COUNTY OR PARISH Rio Arriba	13. STATE N.M.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>	FRACTURE TREATMENT	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	(Other) "Squeeze Casing & Completion"	<input type="checkbox"/>		<input type="checkbox"/>
(Other)	<input type="checkbox"/>			(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.) *

10-15-75 MOL & RU. Killed well.
10-16-75 Shot tubing off @ 5585'. Pulled tubing. Ran Baker cement retainer & set @ 5390'. Squeezed w/125 sxs. Cl. "B" w/2% gel & 12 1/2# Gilsonite per sack and 75 sx Cl. "B" w/10% sand & 2% CC.
10-17-75 Perf'd 1 squeeze hole @ 2880'. Went in hole w/retainer and set @ 2730'. Squeezed w/125 sxs Cl. "B" w/2% CC. WOC 12 hours.
10-18-75 Drilled retainer & cement to 2890'. Tested 7" casing to 800 psi - Held OK. Drilled retainer and cement to 5460'.
10-19-75 Drilled cement to 5483'. Went in hole w/knuckle joint and 4 3/4" core head. Drilled to 5494'. Went in hole w/6 1/8" hole opener & opened 4 3/4" hole to 5490'.
10-20-75 Went in hole with core head and knuckle joint & drilled to 5507'. Went in hole w/reamer and bit and drilled to 5514'. Hole wet.
10-21-75 Blew well & drilled to 5655'. Hole wet. Blew well & drilled to 5688'. Hole wet.
10-22-75 Drilled to 5900'.
10-23-75 Drilled to 6107'.
10-24-75 Drilled to 6138' KB. Ran 188 joints (6122') 4 1/2", 10.5#, K-55 casing set @ 6132' KB. Cemented w/125 sxs. Cl. "B" w/4% gel & 12 1/2# Gilsonite per sack. P.C. @ 6102'. Top cement @ 4100'.

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

SIGNED D. H. Maroncelli TITLE Petroleum Engineer DATE 10-31-75

(This space for Federal or State office use)

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

*See Instructions on Reverse Side