

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM 03040-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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Northwest Pipeline Corporation		San Juan 29-6 Unit
3. ADDRESS OF OPERATOR P.O. Box 90 Farmington, New Mexico 87401		8. FARM OR LEASE NAME San Juan 29-6 Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 800' FSL & 990' FWL		9. WELL NO. 106
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Basin Dakota
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6835 KB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 31, T29N, R6W NMPM
		12. COUNTY OR PARISH Rio Arriba
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	completion		<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or 1a completion 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.) *

12-8-74: MOL & RU - Spud @ 5:30PM
 12-9-74: Drill 13-3/4" hole to 308' KB - Ran 9 joints (289') of 9-5/8" 36# K-55 casing & set at 302' KB. Cement with 280 sks. Cement Circ. WOC 12 hours. Test casing to 600 psi for 30 min. OK.
 12-15-74: Drill 8-3/4" hole to 3900' KB. Ran 95 jts (3889') 7" 20# J-55 Csg. & set @ 3900 KB. Cemented with 165 sacks. Top cement by temperature survey 2700'-Test casing to 100 psi for 30 min. OK.
 12-19-74: Gas drill 6-1/4" hole to 8100'KB. Ran Induction & density logs.
 12-20-74: Ran 241 jts (8071') 4-1/2" 11.6# & 10.5# K-55 casing and set @ 8084'KB. Cement with 320 sacks. Top cement by temperature survey-3550'.
 12-21-74: PBD 8050' KB- Run tubing and clean out to 8050'. Spot 300 gal 7-1/2% Hcl Run G/R CCL - Perforate 4 zones w/18 spz-from 7882-94', 7902-08', 7922-28' and 7998-8016' - Frac with 50,000# 20-40 sand and 50,000 gal slick water with 2%CC.
 12-24-74: Clean out to 8036' & land 1-1/2" 2.9# J-55 EUE tubing @ 8013'KB.

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

SIGNED O.B. Whitenburg TITLE Production & Drilling Eng. DATE 1-9-75
 (This space for Federal or State office use)

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