

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

~~SF03040~~ NM 3040

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 <input type="checkbox"/>		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, Farmington, New Mexico 87401		9. WELL NO. 6A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1095' FNL & 1780' FWL		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21, T29N, R6W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6400' 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:

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"/>	

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 checked="" type="checkbox"/>	ABANDONMENT* <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.)\*

7-30-76 Drilled 8-3/4" hole to 3662' w/mud. Ran 90 jts. (3649') 7", 26#, K-55 casing set at 3662'. Cemented with 110 sxs 65/35 poz w/12% gel followed by 50 sxs Cl. "B" w/2% CC. WOC. Top of cement at 2000' by temperature survey. Tested casing to 600 PSI, Held OK.

8-3-76 Drilled 6-1/8" hole to 5734' w/gas. Ran gamma ray induction and density logs. Ran 68 jts. (2238') 4-1/2", 10.5#, K-55 casing liner set @ 5723'. Top of liner at 3485'. F.C. at 5690'. Cemented with 215 sxs. Cl. "B" w/4% gel and 1/4 cu. ft. gilsonite /sx.

8-5-76 Cleaned out to F.C. at 5690'. Tested casing to 3200 PSI, held OK. Ran CCL log and perfed one shot at 5066', 5074', 5084', 5110', 5118', 5126', 5134', 5148', 5462', 5468', 5476', 5484', 5584', 5508', 5514', 5522', 5530', 5544', 5552', 5564', 5578', and 5584'. Pumped 1000 gal. 7-1/2% HCL, fraced with 70,000 gal. water and 60,000 lbs. 20/40 sand.

8-6-76 Ran 176 jts. (5546') 2-3/8", 4.7# EUE, J-55 tubing set at 5558'. Shut well in for test.

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

SIGNED D.H. Maroncelli

TITLE Production Engineer

DATE 8-10-76

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

DATE \_\_\_\_\_