

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 well ☐ gas well ☒ other

2. NAME OF OPERATOR

Northwest Pipeline Corporation

3. ADDRESS OF OPERATOR

P.O. Box 90, Farmington, N.M. 87401

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

AT SURFACE: 1010' FNL & 930' FEL

AT TOP PROD. INTERVAL: Same as above

AT TOTAL DEPTH: Same as above

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)

(other)

SUBSEQUENT REPORT OF:

RECEIVED

JUN 12 1969

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

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.)*

4-27-81 GO ran GR/CC1 log. Perfed 12 holes from 3753' - 3823'. SI well.

6-3-81 Smith spearheaded 500 gal 7-1/2% HCl. Fraced w/ 5000 gal pad slick wtr followed w/ 45,000# 20/40 sand @ 1/2 - 1 ppg. MIR 30 BPM; AIR 26 BPM; MIP 4000#; AIP 3800#. Job completed @ 0910 hrs. ISIP 900#; 400# in 5 min. Opened well @ 1015 hrs 6-3-81.

6-4-81 to 6-10-81 SI for buildup.

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

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

SIGNED Donna J. Brace TITLE Production Clerk DATE 6-10-81

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____
NMOCC

DATE _____

JUN 15 1991

BY

•See Instructions on Reverse Side

djb/