

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

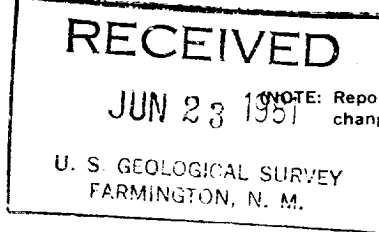
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

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: 1885' FNL & 1165' 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

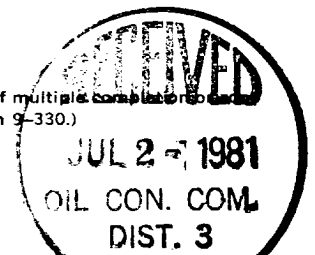
REQUEST FOR APPROVAL TO:
TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) _____

SUBSEQUENT REPORT OF:

- ☐
☒
☐
☐
☐
☐
☐
☐
☐
☐



5. LEASE
SF 078917
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
San Juan 29-5 Unit
8. FARM OR LEASE NAME
San Juan 29-5 Unit
9. WELL NO.
#100
10. FIELD OR WILDCAT NAME
Gobernador PC & Blanco MV
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 25, T29N, R5W
12. COUNTY OR PARISH
Rio Arriba
13. STATE
N.M.
14. API NO.
30-039-22534
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6795' GR



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.)*

6-11-81 Drld bridge plug.

6-12-81 to 6-14-81 Blowing well w/ compressor.

6-15-81 Blue Jet set production packer @ 3850'. MV - Ran 195 jts of 2-3/8" 4.7#, J-55, EUE & landed @ 5900'. PC - ran 109 jts of 1-1/4", 2.33#, J-55, IJ and set at 3708'. Pumped out plugs and gauged well up tbq. SI @ 0600 hrs 6-15-81.

NOW WAITING ON IP TEST.

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 6-23-81
Donna J. Brace (This space for Federal or State office use)

ACCEPTED FOR RECORD

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

NMOCC

*See Instructions on Reverse Side

JUL 01 1981
BY Dean Elliott