

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, New Mexico 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	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other) <u>Commence Drilling</u>	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

RECEIVED

ADD

U. S. GEOLOGICAL SURVEY
FARMINGTON

(NOTE: Report results of multiple completion of 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.)*

4-12-81 Spudded 12-1/4" surface hole at 1330 hrs. Ran 5 jts of 9-5/8", 36# K-55, ST&C & set at 198'. Cmt'd w/ 115 sx C1 "B" w/ 1/4# flo-cele/sx & 3% CaCl₂. Circ out 5 bbls. Plug down at 1900 hrs.

4-13-81 to 4-16-81 Drlg ahead to a depth of 3972'.

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

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

SIGNED Donna A. Grace TITLE Production Clerk DATE 4-16-81
Donna A. Grace

(This space for Federal or State office use)

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

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

APR 21 1981

FARMINGTON DISTRICT

***See Instructions on Reverse Side**

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