d**j**b

## UNITED STATES

UNITED STATES DEPARTMENT OF THE INTERIOR	5. LEASE SF 081114
GEOLOGICAL SURVEY	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 differ reservoir. Use Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME San Juan 29-5 Unit
1. oil gas well well well other	8. FARM CR LEASE NAME San Juan 29-5 Unit 9. WELL NO.
2. NAME OF OPERATOR Northwest Pipeline Corporation	#47A  10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR P.O. Box 90, Farmington, N.M. 8740	Blarico MV / Blanco PC  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space below.) AT SURFACE: 940 FNL & 1360 FWL AT TOP PROD. INTERVAL: Same as above AT TOTAL DEPTH: Same as above	Sec 4, T29N, R5W  12. COUNTY OR PARISH 13. STATE  Rio Arriba N.M.  14. API NO.
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)	(NOTE: Report results of multiple completion proportion change on Form 9-330). All CON. COM.  PAGE 1 of 3
to 3500# - 15 min OK. Spotte perfs (MV). Blue Jet ran GR/	ed 750 gal of 7-1/2% across
8-3-81 HOWCO established rate of 100 sx Cl "B" w/ 2% CaCl <sub>2</sub> & d for 20 min. Released pressur to 2500# held 25 min. Released 0 3245'. Job completed 0 083	lisplaced w/ 15 bbls. Held 2500# re & well flowed back. Pressured sed pressure OK. Est top of cmt
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct  SIGNED	
Donna D. Brace (This space for Federal or Sta	
CONDITIONS OF APPROVAL, IF ANY:	DATE
djb NMOCC	by