UNITED STATES SUBMIT IN TRIPLICATE* (Other instructions on re The INTERIOR rerse side) Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

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GEOLOGICAL SURVEY	SF 080066
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.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
I. OIL GAS WE'LL WILL X OTHER 2. NAME OF OPERATOR	7. UNIT AGREEMENT NAME San Juan 30-5 Unit 8. FARM OR LEASE NAME
Northwest Pipeline Corporation 3. ADDRESS OF OPERATOR	San Juan 30-5 Unit 9. WELL NO.
P. O. Box 90 Farmington, New Mexico 87401. 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	43 10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
1180' FSL and 800' FWL	Sec. 5, T30N, R5W
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6414 GR	Rio Arriba N.M.
16. Check Appropriate Box To Indicate Nature of Notice, Report, or O	ther Dala
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL CHANGE PLANS FULL OR ALTER CASING MULTIPLE COMPLETE SHOOTING OR ACIDIZING WATER SHUT-OFF FRACTURE TREATMENT X X (Other)	REPAIRING WELL ALTERING CASING ABANDONMENT* Completion* of multiple completion on Well tion Report and Log form.)
10-5-75 Drilled 8 3/4" hole to 3729' w/mud. Ran 91 joints (3 csg. set @ 3729' KB. Cemented w/160 sxs. WOC 12 hou Drilled 6 1/4" hole to 5940' w/gas. Ran GR Induction Density Logs. Ran 74 joints (2384') 4 1/2", 10.5#, K KB. F.C. @ 5908'. Top of liner @ 3556'. Cemented w hours.	rs. and Compensated -55 csg. set @ 5940'
10-10-75 Cleaned out to F.C. @ 5908'. Tested csg. to 3500 psi 500 gal. 7 1/2% HCl. Ran GR/CCL Log and perforated f w/27 shots. Pumped 1000 gal. 7 1/2% HCl w/30 ball se 10-11-75 Fractured w/80,000 gal. treated water and 70,000# 20/10-13-75 Ran 185 joints (5808') 2 3/8", 4.7#, EUE tubing set @ well.	rom 5344' to 5830' alers. 40 sand.
COM.	
18. I hereby certify that the foregoing is true and correct (111.) 15%. SIGNED	DATE Oct. 14, 197

TITLE .

(This space for Federal or State office use)

APPROVED BY ______CONDITIONS OF APPROVAL, IF ANY:

DATE _