

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 080066

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 different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME San Juan 30-5 Unit	
2. NAME OF OPERATOR Northwest Pipeline Corporation		8. FARM OR LEASE NAME San Juan 30-5 Unit	
3. ADDRESS OF OPERATOR P. O. Box 90 Farmington, New Mexico 87401		9. WELL NO. 44	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1850' FSL & 1165' FWL		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 6, T30N, R5W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6394' GR		12. COUNTY OR PARISH Rio Arriba	
		13. STATE N.M.	

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	"Completion"	<input type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

- 9-19-75 Drilled 8 3/4" hole to 3721' KB with mud. Ran 92 joints (3709') 2", 20#, K-55 casing set @ 3721' KB. Cemented w/160 sks. cement. WOC 12 hours.
- 9-20-75 Top of cement @ 2000' by temp. survey.
- 9-23-75 Drilled 6 1/4" hole to 5906' with gas. Ran Gamma Induction and Gamma Density logs. Ran 56 joints (2354') 4 1/2", 10.5#, K-55 casing liner.. Top @ 3552', F.C. @ 5862', shoe @ 5905' KB. Cemented w/215 sks. WOC 18 hours.
- 9-24-75 Tested liner to 1500 PSI-OK. Spotted 500 gal. 7 1/2% HCl and perforated from 5320' to 5820' w/19 shots.
- 9-25-75 Frac'd w/70,000 # 20/40 sand and 80,000 gal. treated water.
- 9-28-75 Ran 184 joints (5778') 2 3/8", 4.7#, J-55, EUE tubing, set @ 5790 KB. Kicked well off thru tubing. Shut-in well.

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

SIGNED D. H. Maroncelli  
D. H. MaroncelliTITLE Petroleum EngineerDATE October 2, 1975

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side