

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 ☐ gas ☒ 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: 805' FSL & 820' FWL
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 078997

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
San Juan 30-5 Unit

8. FARM OR LEASE NAME
San Juan 30-5 Unit

9. WELL NO.
#72

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 10, T30N, R5W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
N.M.

14. API NO.
30-039-22573

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6429' GR

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

3-27-81 MOL & RU service unit. CO hole to 7860'. Press test csg to 4000# for 15 min OK. Circ hole w/ 2% CaCl₂ wtr. Spotted 500 gal 7-1/2% HCl. GO ran GR/CCl logs.

3-28-81 GO perforated intervals from 7790' to 7846'. w/ 1 shot every 2' (total of 15 holes). Dowell pumped 20,000 gal pad of 2% CaCl₂ wtr w/ 2-1/2# FR-20/1000 gal. Followed w/ 4000# 20/40 sand. MIR 23 BPM at 4000 psi went to flush @ 16 BPM at 4000#. Dowell pumped 10,000 gal pad 40# Guar Gum Gel wtr. Followed w/ 45,000# 20/40 sand at 1 ppg. MTP 4100#; ATP 4100#; AIR 16 BPM; MIR 18 BPM. Job completed at 2000 hrs 3-28-81

3-29-81 Well making 1-1/2" stream of wtr.

3-30-81 to 4-1-81 Blowing well w/ compressor.

4-2-81 Ran 253 jts of 2-3/8", 4.7#, J-55, EUE landed at 7798'. Pumped out expendable check valve & gauged well up tbq @ 615 MCFD. SI FOR IP TEST 4-6-81

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

NO WAITING ON IP TEST.
18. I hereby certify that the foregoing is true and correct

SIGNED Donna A. Brace TITLE Production Clerk DATE 4-28-81
Donna J. Brace

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE MAY 10 1981

NMOCO

*See Instructions on Reverse Side

FARMINGTON DISTRICT
BY RB