

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, N.M. 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1000 FNL & 1720 FEL
AT TOP PROD. INTERVAL: Same as above
AT TOTAL DEPTH: Same as above

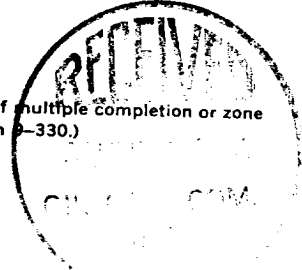
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:
TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
PULL OR ALTER CASING
MULTIPLE COMPLETE
CHANGE ZONES
ABANDON*
(other)

SUBSEQUENT REPORT OF:

5. LEASE
SF 080066
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.
79
10. FIELD OR WILDCAT NAME
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 5, T30N, R5W
12. COUNTY OR PARISH | 13. STATE
Rio Arriba | N.M.
14. API NO.
30-039-22705
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6513' 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.)*

8-14-81 to 8-15-81 MOL & RU. 1PU 3-7/8" bit & cleaned out to 8060'. Tested csg to 4000# for 30 min - OK. Circ hole w/ 2% CaCl₂ wtr & spotted 500 gal 7-1/2% HCL across perfs. Blue Jet ran GR/CCl & perfed 19 holes from 7932' to 8028'. Smith pumped 1000 gal 15% acid & dropped 40 balls. No ball action. Ran junk basket & rec'd 40 balls w/ no hits. Smith pumped 20,000 gal pad to frac (2% CaCl₂ & 2-1/2# FR/1000 gal) followed w/ 70,000# 40/60 sand @ 1/2 ppg and 10,000# 20/40 sand @ 1 ppg. MIR 30 BPM; MIP 4100#; AIR 25 BPM; AIP 4100#. Job completed @ 0400 hrs 8-15-81. ISIP 2900#, 2600# in 15 min, 1700# in 2 hrs.

8-16-81 to 8-18-81 Blowing well w/ compressor.

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

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

SIGNED Donna J. Brace TITLE Production Clerk DATE 8-18-81
Donna J. Brace

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

AUG 20 1981

*See Instructions on Reverse Side

NMOCC

FARMINGTON DISTRICT
BY E. J. [Signature]