REPORT, OR OTHER DATA

Subsurface Safety Valve: Manu. and Type ___

CONDITIONS OF APPROVAL, IF ANY

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

REQUEST FOR APPROVAL TO:

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	5. LEASE SF 078997 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 Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME San Juan 30-5 Unit 8. FARM OR LEASE NAME
1. oil gas other	San Juan 30-5 Unit 9. WELL NO. #78
2. NAME OF OPERATOR Northwest Pipeline Corporation 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Basin Dakota
P.O. Box 90, Farmington, N.M. 87499	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec 7, T30N, R5N
at surface: 1700 FSL & 1010 FWL NW/SW at top prod. interval: 1700 FSL & 1010 FWL	12. COUNTY OR PARISH 13. STATE Rio Arriba N.M.
AT TOTAL DEPTH: 1700 F\$L & 1010 FWL 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO. 30-039-22707

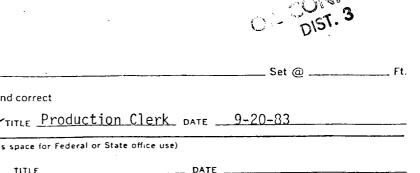
15. ELEVATIONS (SHOW DF, KDB, AND WD)

6211' KB

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* Location Clean Up (other) 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.)*

SUBSEQUENT REPORT OF:

Location clean up and reseeding completed on 8-29-83



d.jb.

APPROVED BY

' (This space for Federal or State office use)

TITLE