

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: 1560 FNL & 850 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:

☐
☒
☐
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☐
☐
☐

5. LEASE
NM 012331
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.
#12A
10. FIELD OR WILDCAT NAME
Blanco MV / Gobernador PC
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 31, T30N, R5W
12. COUNTY OR PARISH
Rio Arriba
13. STATE
N.M.
14. API NO.
30-039-22729
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6819' 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.)*

7-24-81 MOL & Drld FC & cleaned out to 6125' (liner shoe @ 6141'). Tested Csg & found liner leaking thru shoe. GO set BP @ 6120' & tested csg to 3500# - OK. Ran CCI and CBL found fpoor bond over PC pay. Perf 2 squeeze holes @ 3830'. Prep to squeeze PC.

7-25-81 TIH w/ Baker Model "C" fullbore pkr @ set @ 3646'. Halliburton est rate throu squeeze perfs @ 2 to 3 BPM @ 2900-2000 psig. Pumped 100 sx C1 "B" cmt containing 2% CaCl₂ down tbg. Displaced cmt w/ 16 bbls & shut down. Left 120' cmt in 7" csg. At 15 min pressured to 1000# at 30 min pressured to 1500# at 2 hrs pressured squeeze to 2500# & held for 15 min. TOH w/ 2-3/8" tbg & pkr. WOC 12 hrs. PU 6-1/4" mill on 2-3/8" tbg & drld out 200' of cmt. Tagged cmt @ 3746'.

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 8-12-81

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

NMOCC

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