

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. 8740.

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1850 FSL & 790 FWL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

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

5. LEASE  
SF 078767

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME  
Rosa Unit

8. FARM OR LEASE NAME  
Rosa Unit

9. WELL NO.  
68

10. FIELD OR WILDCAT NAME  
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 17, T31N, R5W

12. COUNTY OR PARISH  
Rio Arriba

13. STATE  
N.M.

14. API NO.  
30-039-22123

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6311' GR

REQUEST FOR APPROVAL TO:                      SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF                      

FRACTURE TREAT                      

SHOOT OR ACIDIZE                      

REPAIR WELL                      

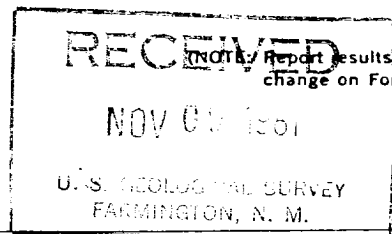
PULL OR ALTER CASING                      

MULTIPLE COMPLETE                      

CHANGE ZONES                      

ABANDON\*                      

(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.)\*

1. Move in service unit & pull tbg.
2. Set bridge plug above perms.
3. Run Csg Inspection Log and using log & pkr locate csg leak.
4. Squeeze csg leak w/ cement as required.
5. Drill out cement, pressure test, & resqueeze if necessary
6. Drill bridge plug with gas, run tbg and return well to production



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED P.M. Pippin TITLE Sr Prod Engineer DATE 11-6-81

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) RAYMOND W. VINYARD TITLE ACTING DISTRICT SUPERVISOR DATE NOV 17 1981

CONDITIONS OF APPROVAL IF ANY

PMP/djb *uh7*

\*See Instructions on Reverse Side

NMOCC