

9-331
1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 010910

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Holt Unit

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Blanco Pictured Cliff

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

Sec 19, T32N, R11W NMPM

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

IL ☐ GAS ☒ OTHER
/E/L WELL

NAME OF OPERATOR

Northwest Pipeline Corporation

ADDRESS OF OPERATOR

P.O. Box 90 Farmington, New Mexico 87401

LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1660'/N & 1890'/E

PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6569 GR

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Clean up location

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

18. 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 perti-
nent to this work.)*

Trees on location have been buried in mud pit and crushed with dozer.

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

SIGNED

O. B. Whitenburg is

(This space for Federal or State office use)

TITLE Production & Drilling Eng.

DATE 3-26-75

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side