

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: 920 FNL & 1580 FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same
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 078543
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
San Juan 32-7 Unit
8. FARM OR LEASE NAME
San Juan 32-7 Unit
9. WELL NO.
28A
10. FIELD OR WILDCAT NAME
Blanco Mesa Verde
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 35, T32N, R7W
12. COUNTY OR PARISH
San Juan
13. STATE
N.M.
14. API NO.
30-045-25084
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6632' GR

(NOTE: Report results of multiple completion or zone change on Form 9-320.)

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.)*

11-12-81 Ran 191 jts (5894') of 2-3/8", 4.7#, J-55, EUE tbq & set @ 5900' KB.
Pumped out plugs & gauged well up tbq. Turned over to Production Department.

NOW WAITING ON IP TEST.



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

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

SIGNED Donna J. Grace TITLE Production Clerk DATE 11-25-81
Donna J. Grace (This space for Federal or State office use)

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

ACCEPTED FOR RECORD

DEC 02 1981

FARMINGTON DISTRICT

BY Shn

*See Instructions on Reverse Side

NMOCC