

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 ☐ gas ☒ other

2. NAME OF OPERATOR
Northwest Pipeline Corporation

3. ADDRESS OF OPERATOR
P.O. Box 90, Farmington, N.M. 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 940 FNL & 1080 FEL NE/NE
AT TOP PROD. INTERVAL: 940 FNL & 1080 FEL
AT TOTAL DEPTH: 940 FNL & 1080 FEL

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) Location Clean Up

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

SEP 21 1983
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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.)*

Location clean up and reseeded completed on 9-12-83

RECEIVED
OCT-01-83
CIL CON
DIST. 3

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 9-20-83
Donna J. Brace

*(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY

TITLE _____

DATE _____

ACCEPTED FOR RECORD

B
djb/

*See Instructions on Reverse Side

WMOCC

OCT 05 1983

FARMINGTON RESOURCE AREA

BY [Signature]