Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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
PO Box 90, Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1040' FNL & 1830' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
SF 078917

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
San Juan 29-5 Unit

8. FARM OR LEASE NAME
San Juan 29-5 Unit

9. WELL NO.
87

10. FIELD OR WILDCAT NAME
Gobernador Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 25 T29N R5W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6566'GR

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

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) "Drilling Summary"			X

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OIL CON. COM.
DIST. 3

(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.)*

9-20-78 Spud 12-1/4" surface hole @ 2100 hrs. Drilled to 135'. Ran 8-5/8" csg set @ 135'. Cmted w/ 90 sks. Good circ.

9-21-78 Plug down @ 0200 hrs. Circ 2 bbls cmt. WOC. Tested csg to 600 psi, held OK. Drilling.

9-26-78 Reached TD 3710'. Ran I-ES & GR-Density logs.

9-27-78 Ran 2-7/8", 6.5#, J-55, EUE csg set @ 3680'. Cmted w/ 170 sks. Plug down @ 1045 hrs. Pressure tested to 4000 psi for 30 min, held OK. Rig released @ 1200 hrs. Ran temp survey & found top of cmt @ 2600' & PBTD @ 3671'.

Waiting on completion.

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

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

SIGNED [signature] TITLE Production Clerk DATE September 29, 1978

(This space for Federal or State office use)

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

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DURANGO, COLO.

*See Instructions on Reverse Side

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GEOLOGICAL SURVEY

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1. oil well ☐ gas well ☒ other

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Northwest Pipeline Corporation

3. ADDRESS OF OPERATOR
PO Box 90, Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1040' FNL & 1830' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: Same

5. LEASE
SF 078917

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
San Juan 29-5 Unit

8. FARM OR LEASE NAME
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14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6566 GR

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

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) "Completion Operations"			

(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.)*

5-17-79 Ran GR-CCL from 3668' to 2500'.

5-21-79 Perfed from 3590' to 3528' w/ 14 shots. Pr tested lines to 4000 psig, held OK. Pumped 5000 gal 7-1/2% HCl w/ 30 ball sealers. Balled off @ 4200 psig. Pumped 5000 gal pad. Fraced w/ 50,000# 10/20 sand @ 1 PPG, flushed w/ 21 BW. All fluid contained 2-1/2# FR-2/1000 gal. Breakdown @ 1700 psig. AIP 3600 psig, AIR 25 BPM, MIP 4000 psig, MIR 29 BPM, ISIP 800 psig, 10 min 500 psig. 1140 bbls to recover. Frac job complete @ 1200 hrs.

5-31-79 Well open & vaporing (liquid @ surface).

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

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

SIGNED Barbara E. Rex TITLE Production Clerk DATE June 1, 1979

(This space for Federal or State office use)

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

JUN 5 1979
U. S. GEOLOGICAL SURVEY

*See Instructions on Reverse Side

Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

See Instructions at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Well API No.
PHILLIPS PETROLEUM COMPANY	

Address: 300 W ARRINGTON, SUITE 200, FARMINGTON, NM 87401

Reason(s) for Filing (Check proper box)
- New Well [ ]
- Recompletion [ ]
- Change in Operator [X]
- Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]
- Other (Please explain) [ ]

If change of operator give name and address of previous operator: Northwest Pipeline Corp., 3535 E. 30th, Farmington, NM 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
San Juan 29-5 Unit	87	GOBERNADOR PICTURE CLIFF		

Location: Unit Letter C : 1040 Feet From The North Line and 1830 Feet From The West Line

Section 25 Township 29N Range 5W NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)
Gary Energy [XX]	P.O. Box 159, Bloomfield, NM 87413
Name of Authorized Transporter of Casinghead Gas or Dry Gas [XX]	**Address (Give address to which approved copy of this form is to be sent)**
Northwest Pipeline Corp.	P.O. Box 58900, SLC, Utah 84158-0900

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
						Attn: Claire Potter

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
Perforations			**Depth Casing Shoe**

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL *(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)*

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	**Tubing Pressure**	**Casing Pressure** / **Choke Size**
Actual Prod. During Test	**Oil - Bbls.**	**Water - Bbls.** / **Gas- MCF**

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DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

L E Robinson

Signature

L. E. Robinson — Sr. Drlg. & Prod. Engr.

Printed Name — Title

APR 0 1 1991 — (505) 599-3412

Date — Telephone No.

OIL CONSERVATION DIVISION

APR 0 1 1991

Date Approved

By

SUPERVISOR DISTRICT #3

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
2) All sections of this form must be filled out for allowable on new and recompleted wells.
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION

MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL

Form C-122
Revised 5-1-65

Type Test: [X] Initial [ ] Annual [ ] Special				Test Date: 6-26-79	
Company: Northwest Pipeline Corp.		Connection: New Completion			
Pool: Gobernador Pictured Cliffs		Formation: Pictured Cliffs		Unit: San Juan 29-5 Unit	
Completion Date: 5-31-79	Total Depth: 3710	Plug Back TD: 3671	Elevation: 6566	Farm or Lease Name: San Juan 29-5 Unit	
Csg. Size: 2 7/8 / Wt.: 6.5 / d: 2.441 / Set At: 3680		Perforations: From 3528 To 3540		Well No.: # 87 PC	
Tbg. Size: NONE / Wt. / d / Set At		Perforations: From To		Unit: C / Sec.: 25 / Twp.: 29N / Rge.: 5W	
Type Well – Single – Bradenhead – G.G. or G.O. Multiple: GAS-TUBINGLESS COMPLETION		Packer Set At: NONE		County: Rio Arriba	
Producing Thru: casing	Reservoir Temp. °F: [ ]	Mean Annual Temp. °F	Baro. Press. – P_a: 12.0	State: New Mexico	
L	H	Gg: .60	% CO_2	% N_2	% H_2S / Prover: 3/4 Choke / Meter Run / Taps

FLOW DATA

NO.	Prover Line Size	X	Orifice Size	Press. p.s.i.g.	Diff. h_w	Temp. °F	TUBING DATA Press. p.s.i.g.	TUBING DATA Temp. °F	CASING DATA Press. p.s.i.g.	CASING DATA Temp. °F	Duration of Flow
SI			SIP						1092		SIP
1.	2"	x	.750	100		60°					3 hr
2.											
3.											
4.											
5.											

RATE OF FLOW CALCULATIONS

NO.	Coefficient (24 Hour)	$\sqrt{h_w P_m}$	Pressure P_m	Flow Temp. Factor Ft.	Gravity Factor Fg	Super Compress. Factor, Fpv	Rate of Flow Q, Mcfd
1	9.604		112	1.000	1.291	1.007	1398
2.							
3.							
4.							
5							

NO.	P_t	Temp. °R	T_r	Z
1				
2.				
3.				
4.				
5				

Gas Liquid Hydrocarbon Ratio _____ Mcf/bbl.
A.P.I. Gravity of Liquid Hydrocarbons _____ Deg.
Specific Gravity Separator Gas _____ XXXXXXXXXX
Specific Gravity Flowing Fluid XXXXX _____
Critical Pressure _____ P.S.I.A. _____ P.S.I.A.
Critical Temperature _____ R _____ R

P_c _____ P_c^2 _____

NO	P_t	P_w	P_w^2	$P_c^2 - P_w^2$
1	12544	146	21316	1197500
2				
3				
4				
5				

(1) $\frac{P_c^2}{P_c^2 - P_w^2} = 1.018$

(2) $\left[\frac{P_c^2}{P_c^2 - P_w^2}\right]^n = 1.015$

AOF = Q $\left[\frac{P_c^2}{P_c^2 - P_w^2}\right]^n = 1419$

Absolute Open Flow 1419 Mcfd @ 15.025 Angle of Slope θ _____ Slope, n .785

JUL 1979
OIL CON. COM.
DIST. 3

Remarks:

GL	1-e-s	FcQ^2	R^2	Pt^2	Pt^2+R^2	Calc Pw
2154	.145	60222	8732	12544	21276	146

Approved By Commission:	Conducted By:	Calculated By:	Checked By:
	Ray Granam	R. L. Myers	B. J. Broughton