

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 deeper 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: 990 FSL & 1830 FEL

AT TOP PROD. INTERVAL: Same as above

AT TOTAL DEPTH: Same as above

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 ☐

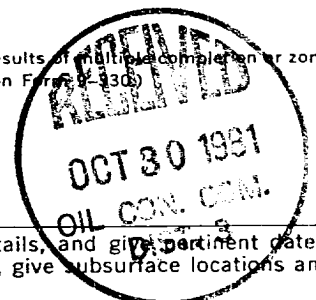
ABANDON* ☐

(other)

SUBSEQUENT REPORT OF:

RECEIVED
OCT 27 1981
GEOLOGICAL SURVEY
FARMINGTON, N.M.

(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.)*

10-19-81 MOL & RU. PU 3-7/8" bit on 2-3/8" tbg & cleaned out to 5665'. Pressure tested to 3500# for 10 min - held OK. Circ hole & spotted 750 gal 7-1/2% HCl across perfs. Blue Jet ran GR/CCl & perfed 26 holes from 5166' to 5626'. HOWCO broke down MV w/ 1000 gal of 7-1/2% HCl & dropped 50 balls. Ran junk basket & rec'd 49 balls w/ 26 hits. HOWCO fraced w/ 10,000 gal pad of treated wtr followed by 120,000# of 20/40 sand @ 1-2 ppg. Total fluid 1975 bbls. AIR 66 BPM; MIR 69 BPM; ATP 1900#; MTP 2400#. ISIP 9#. Job done @ 2245 hrs 10-19-81.

10-20-81 to 10-21-81 Cleaning up well after frac.

10-22-81. Rig released. Ran 176 jts (5480') of 2-3/8", 4.7#, J-55, EUE 8RD tbg & landed @ 5486' KB. Pumped out plugs & gauged well. Well SI for clean up & IP Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Donna J. Brace TITLE Production Clerk DATE 10-26-81
Donna J. Brace

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

NMOCC

OCT 28 1981
BY [Signature]