UNITED STATES	5. LEASE
DEFARTMENT OF THE INTERIOR	SF 078763
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELL	7. UNIT AGREEMENT NAME
(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.)	Rosa Unit
	8. FARM OR LEASE NAME
1. oil □ gas ☑	Rosa Unit
well well other	9. WELL NO.
2. NAME OF OPERATOR	#45
Northwest Pipeline Corporation	10. FIELD OR WILDCAT NAME Blanco Mesa Verde
3. ADDRESS OF OPERATOR P.O. Box 90, Farmington, N.M. 87499	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space	
below.)	Sec. 9, 131N, KDM
AT SURFACE: 820 FSL & 960 FWL SW/SW	12. COUNTY OR PARISH 13. STATE
AT TOP PROD INTERVAL: 820 FSL & 960 FWL	Rio Arriba N.M.
AT TOTAL DEPTH: 820 FSL & 960 FWL 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NO	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6572' KB
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT C	
TEST WATER SHU FOFF	
FRACTURE TREAT	*
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE U U CHANGE ZONES U	
ABANDON*	
(other) Localion ordan or	
17 DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clear including estimated date of starting any proposed work. If we measured and true vertical depths for all markers and zones in the complex control of the co	pertinent to this work.)*
Location clean up and reseeding completed	d on 7-20-83
	\$736 V
	₩
	, to 1
•	3
	Set @ F
Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct	ion Clark 9.20.83
Doina / Brace	ion Clerk DATE 9-20-83
'(This space for Federal or	r State office use)
APPROVED BY	ACCEPTED FOR RECORD
COMPANIENT OF THE PARENT OF TH	POPPLIED ION UPOOUD

*See Instructions on Reverse Side

001 05 1983

FARMINGTON RESOURCE AREA