

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. 87499  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1560 FWL & 1120 FSL SE/SW  
AT TOP PROD. INTERVAL: 1560 FWL & 1120 FSL  
AT TOTAL DEPTH: 1560 FWL & 1120 FSL  
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <input type="checkbox"/>	<input type="checkbox"/>

5. LEASE  
SF 078766  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
  
7. UNIT AGREEMENT NAME  
Rosa Unit  
8. FARM OR LEASE NAME  
Rosa Unit  
9. WELL NO.  
#59  
10. FIELD OR WILDCAT NAME  
Blanco MV/Basin DK & Undes Gallup  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 25, T31N, R6W  
12. COUNTY OR PARISH  
Rio Arriba  
13. STATE  
N.M.  
14. API NO.  
  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6400' GR

RECEIVED  
(NOTE: Report results of multiple completion or zone change on Form 9-330.)  
OIL CON. DIV.  
DIST. 3

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.)\*

We would like to change this location to a Gallup Dakota Commingled well instead of a Mesa Verde/Gallup-Dakota Dual well.

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 8-30-83  
Donna J. Brace

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY

PCT/djb/1  
9X

SEP 08 1983

\*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA  
FARMINGTON, NEW MEXICO  
BY Sm