oil

well

2. NAME OF OPERATOR

AT TOTAL DEPTH:

REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*

REPAIR WELL

(other)

3. ADDRESS OF OPERATOR

gas

well

X

Northwest Pipeline Corporation

AT SURFACE: 1630' FNL & 970' FEL AT TOP PROD. INTERVAL: Same as above

Spud, surface csg set

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.)

other

P.O. Box 90, Farmington, N.M. 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17

Same as above 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,

5. LEASE
SF 078772
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
Rosa Unit
8. FARM OR LEASE NAME
Rosa Unit
9. WELL NO.
#91
10. FIELD OR WILDCAT NAME
Blanco Mesa Verde
11. SEC., T., R., M., OR BLK. AND SURVEY OR
AREA
Sec 35, T32N, R6W
12. COUNTY OR PARISH 13. STATE
Rio Arriba New Mexico
14. API NO.
30-039-22780
15. ELEVATIONS (SHOW DF, KDB, AND WD)

6661' GR

____ change on Form 9-330.)

(NOTE: Report results of multiple completion or zone

U G. GRULUGICAL GURVEY 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.)*

7-15-81 Spudded 12-1/4" surface hole @ 2200 hrs. Drlg surface hole w/ spud mud.

SUBSEQUENT REPORT OF:

7-16-81 Ran 5 jts (211') of 9-5/8", 36#, K-55, ST&C & set @ 225' KB. Woodco cmt'ed w/ 105 sx C1 "B" w/ 1/4# Flo-cele/sx & 3% CaCl₂. Plug down @ 1045 hrs 7-16-81. Circ 4 bbls cmt. WOC 12 hrs. Pressure test to 600# held OK.

7-17-81 to 7-21-81 Drlg ahead to a depth of 2165'.

					-			
Subsurface Safety Valve: Manu. and Ty	pe			Set	t @		F	t.
	s true and correct CC TITLE Production Clerk	DATE _		7-21-	-81			 _
Donna J. Brace	(This space for Federal or State office use)	ي				** **		
APPROVED BY	TITLE	DATE	JUL	2 4	1981			
	NMOCC			ijGran				