

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R/424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 03190

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

CONDRIY 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 "APPLICATION FOR PERMIT—" 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 and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1170' FNL & 1690' FWL

7. UNIT AGREEMENT NAME

Cox Canyon Unit

8. FARM OR LEASE NAME

Cox Canyon Unit

9. WELL NO.

Com #23

10. FIELD AND POOL, OR WILDCAT

Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 17 T32N R11W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6654' GR

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF


PULL OR ALTER CASING


FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

X
X

REPAIRING WELL


FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

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.)\*

9-23-77

Tested 2 7/8" csg to 4000 psi for 30 min. Held OK. Ran GR-CCL to 3405' KB & perfed 24 holes from 3298' to 3322'. Pumped 250 gal 15% HCl & broke down perfs. Fraced w/ 40000# 10/20 sand @ 1 1/4 ppg & treated wtr. Dropped 12 ball sealers after pumping 30000# sand. ISIP = 0 psi. AIR = 26 BPM. MIR = 26.5 BPM. AIP = 2800 psi. MIP = 4000 psi. Well open to atmosphere. Job complete @ 1015 hrs.



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

SIGNED

*Barbara C. Rex*

TITLE Production Clerk

DATE 9-29-77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side