16.

UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

	GEOLOGICAL SURVEY	NM 03189
(Do not use this form for n	OTICES AND REPORTS ON WELLS proposals to drill or to deepen or plug back to a different reservoir. PLICATION FOR PERMIT—" for such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS WELL OTH	ER	7. UNIT AGREEMENT NAME COX Canyon Unit
. NAME OF OPERATOR		8. FARM OR LEASE NAME
Northwest Pipelin	e Corporation	Cox Canyon Unit
ADDRESS OF OPERATOR		9. WELL NO.
	ington, New Mexico 87401	25
See also space 17 below.)	tion clearly and in accordance with any State requirements.*	10. FIELD AND POOL, OR WILDCAT Blanco - Pictured Cliffs
1000 10	H & 1430 IEE	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
	75	Sec. 9, T32N, R11W
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	6598' GR	San Juan N.M.

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

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:					
		1				٦ ا		
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL		
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING		
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING		ABANDON MENT*		

CHANGE PLANS (Other) ... REPAIR WELL (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) 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.)*

The well will be drilled to the Pictured Cliffs formation instead of the Chacra formation as orginally planned.

The production string (2 7/8" tbg.) will be run to 3413' instead of 4984' as originally planned.

> Leader Willed MAY 2 3 1977

proceeding to the control of the con

•				
18. I hereby certify that the foregoing is true and correct				
SIGNED J.P. Slattery	TITLE _	Drilling Engineer	DATE	5/ 19/77
(This space for Federal or State office use)				
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE _		DATE	
IBS/ha Cleaf	3			

JPS/ks

*See Instructions on Reverse Side