

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 ☒ other2. NAME OF OPERATOR  
Northwest Pipeline Corporation3. ADDRESS OF OPERATOR  
PO Box 90, Farmington, New Mexico 874014. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 900' FNL & 1030' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐☐  
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☐

(other) "Completion Operations"

5. LEASE  
SF 078543

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME  
San Juan 32-7 Unit8. FARM OR LEASE NAME  
San Juan 32-7 Unit9. WELL NO.  
4810. FIELD OR WILDCAT NAME  
Undesignated Pictured Cliffs11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 35 T32N R7W12. COUNTY OR PARISH  
San Juan13. STATE  
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6644' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

5-17-79 Ran GR-CCL from 3780' to 2700'.  
5-25-79 RU & perfed 3534' to 3472' w/ 13 shots total. Pumped 500 gal 7-1/2% HCl w/ 26 balls. Balled off @ 4000 psig. Pumped 5000 gal pad wtr followed by 50,000# 10/20 sand & 21 BW flush. All fluid contained 2-1/2# FR/1000 gal wtr. Breakdown @ 1600 psig. AIR 24 BPM, MIR 25 BPM, AIP 3700 psig, MIP 3900 psig. ISIP 1500 psig, 15 min 1100 psig, 30 min 1000 psig. 1100 bbls to recover. Job complete @ 1350 hrs.  
5-30-79 Blowing, making lt mist & small stream wtr.

Subsurface Safety Valve: Manu. and Type

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

SIGNED Barbara C. Rex TITLE Production ClerkDATE June 1, 1979

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: