

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, New Mexico 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1800' FSL & 985' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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)	"Commence Drilling" X	

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.)*

7-7-78 Spudded 12-1/4" surface hole @ 1830 hrs. Drilled to 118'. Ran 8-5/8" csg set @ 116'. Cmted w/ 90 sks. Circ 3-1/2 bbls cmt to surface. Plug down 0015 hrs 7-8-78.
7-8-78 WOC. Pressure tested csg to 600 psi for 30 min, held OK. Drilling ahead.

5. LEASE	SF 078542
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	San Juan 32-7 Unit
8. FARM OR LEASE NAME	San Juan 32-7 Unit
9. WELL NO.	49
10. FIELD OR WILDCAT NAME	Undesignated Pictured Cliffs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	Sec 35 T32N R7W
12. COUNTY OR PARISH	San Juan
13. STATE	New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD)	6724' GR

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

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Barbara E. Rex TITLE Production Clerk DATE July 12, 1978

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
JUL 13 1978

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
DURANGO, COLO.