

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

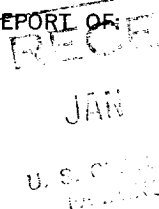
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other ☐
well well
2. NAME OF OPERATOR
Northwest Pipeline Corporation
3. ADDRESS OF OPERATOR
P.O. Box 90, Farmington, N.M. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1795 FNL & 1575' FEL
AT TOP PROD. INTERVAL: Same as above
AT TOTAL DEPTH: Same as above
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:
TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Commence Drlg Operations ☐

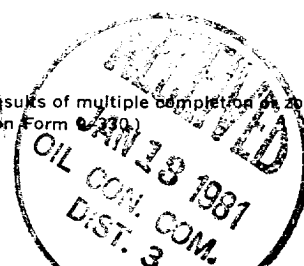
SUBSEQUENT REPORT OF

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5. LEASE
SF 078472
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.
#63
10. FIELD OR WILDCAT NAME
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 28 T32N R7W
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
30-045-24391
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6650' 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.)*

1-4-81 Spudded 12-1/4" surface hole at 1130 hrs.

1-5-81 Drlg ahead with benex & water.

1-6-81 Ran 9 jts (347') of 9-5/8", 36#, K-55, ST&C set at 361' KB.
Woodco cemented w/ 250 sx C1 "B" w/ 1/4# Flo-cele/sx & 3% CaCl₂.
Circ out 1/2 bbl of cement.

1-7-81 Drld to a depth of 1400'.

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

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

SIGNED Donna Brace TITLE Production Clerk DATE Jan 7, 1981
Donna Brace

(This space for Federal or State office use)

ACCEPTED FOR RECORD

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

JAN 12 1981

FARMINGTON DISTRICT

BY BW

NMOCC

*See Instructions on Reverse Side