

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 IV below.)
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☒
☐
☐
☐
☐
☐

CORRECTED
SUNDRY NOTICE

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

Corrected time on 8-16-81 to 1000 hrs.

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.)*

8-13-81 1100 hrs Atchison Const Pick-up truck backed over wellhead and broke master valve off the 2-1/2" nipple. The nipple was bent but remained attached to the wellhead. The well was blowing to the atmosphere uncontrolled.

1200 hrs Removed pick-up from over wellhead. Well was flowing too much to gauge w/ pitot tube.

8-14-81 1600 hrs Well was gauged in excess of 4666 MCFD. Well is still blowing to the atmosphere uncontrolled.

8-15-81 1200 hrs Gauged well in excess of 4933 MCFD.

1400 hrs } Gauged well @ 4820 MCFD. Well is still blowing to atmosphere
1800 hrs } uncontrolled.
2000 hrs }

8-16-81 0800 hrs Gauged well @ 4467 MCFD.

1000 hrs Installed BOP & shut gas flow off. Killed well w/ 60 bbls wtr.

Removed BOP & bent 2-1/2" nipple & installed new 2-1/2" nipple & new 2-1/2" Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Paul C. Thompson TITLE Drilling Engineer DATE 9-8-81

Paul C. Thompson

(This space for Federal or State office use)

ACCEPTED FOR RECORD

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

SEP 15 1981

OPERATOR

NMOCC

FARMINGTON DISTRICT