2. NAME OF OPERATOR

AT TOTAL DEPTH:

3. ADDRESS OF OPERATOR

AT TOP PROD. INTERVAL:

REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES

well

below.)

REPAIR WELL

ABANDON*

(other)

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.)

other

P.O. Box 90, Farmington, N.M. 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,

Same as above

Same as above

Northwest Pipeline Corporation

AT SURFACE: 1680' FNL & 1710' FWL

well

Budget Bureau No. 42-R1424
5. LEASE SF 079380
]
6. IF INDIAN, ALLOTTEE OR TRIBÉ NAME
7. UNIT AGREEMENT NAME
San Juan 32-8 Unit
8. FARM OR LEASE NAME
San Juan 32-8 Unit
9. WELL NO.
#41
10. FIELD OR WILDCAT NAME
Undesignated Fruitland
,11. SEC., T., R., M., OR BLK. AND SURVEY OF
AREA
Sec 23, T32N, R8W
12. COUNTY OR PARISH 13. STATE
San Juan N.M.
'14. API NO.
30-045-24510
15. ELEVATIONS (SHOW DF, KDB, AND WD

6978' GR

ke on Form 9-330.)

Report results of multiple completion or zone

PARSHNUTON, N. M 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.)*

6-2-81 1. Pumped 50 sx cmt into Pictured Cliffs perfs (3866'-3947').

SUBSEQUENT REPORT OF:

2. Spotted acid & perfed Fruitland, (3772' - 3780'). Found cmt @ 3809'

UL S GEOLUGICAL SURVEY

- 3. Fraced Fruitland perfs w/ 25,000# sand in slick wtr.
- 4. Evaluating.

OIL CON. COM.

18.	I hereby	certify that the foregoing is true and correct	
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TITLEST Prod Engineer DATE 6-8-81

(This space for Federal or State office use)

TITLE

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

Subsurface Safety Valve: Manu. and Type ...