UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	Contract #92
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
	Jicarilla 92
1. oil gas well other	9. WELL NO.
2. NAME OF OPERATOR	#11
Northwest Pipeline Corporation	10. FIELD OR WILDCAT NAME Tapacito Pictured Cliffs
3. ADDRESS OF OPERATOR	11. SEC., T., R., M., OR BLK. AND SURVEY OF
P.O. Box 90, Farmington, N.M. 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17	AREA
below.)	Sec 30, T27N, R3W
AT SURFACE: 1800 FNL & 1490 FEL	12. COUNTY OR PARISH 13. STATE
at top prod. interval: 1800 FNL & 1490 FEL	Rio Arriba N.M.
AT TOTAL DEPTH: 1800 FNL & 1490 FEL	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-039-22919
REPORT, OR CTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	A STATE OF THE STA
FRACTURE TREAT \square RECE	
REPAIR WELL NOV 04	1984 E. Report sesults of multiple completion of zon changeson Form 9-330.
PULL OR ALTER CASING U U U MULTIPLE COMPLETE	Chartegon Form 9-250.)
CHANGE ZONES \(\bigcap\) U. S. GEOLOGIC	AL SUDVEY
ABANDON* FARMINGTON	N. M.
(other)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stating locality of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertine.	nt to this work.)*
10-5-82 Ran GR/CC1 and perf'ed 9 holes from 10-12-84 Western est rate & spearheaded 500 g 5000 gal pad (2-1/2# FR/1000) followed by ppg. Total frac fluid 55,000 gal. Job co ISIP 400 psig, 10 min 300 psi, 15 min 300 MIR 23 BPM, MTP 3200#. Opened well to atm 10-13-82 Open well to pit. Left well flowin Turned over to Production Department.	50,000# 10/20 sand at 1/2 - 1 ompleted at 1240 hrs 10-12-82. psig. AIR 21 BPM, ATP 2800#, nosphere at 1530 hrs 10-12-82.
SI for buildup & IP Test.	
Subsurface Safety Valve: Manu. and Type	Set @ F
18. I hereby certify that the foresping is true and correct	
SIGHED Norma 1 Deace TITLE Production C	lerk DATE October 28, 1982.
Donna Brace (This space for Federal or State of	
APPPOYED BY TITLE	/ CCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY	
R	NOV 5 1982

*See Instructions on Reverse Side

