

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, N.M. 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1660 FWL & 1850 FNL
AT TOP PROD. INTERVAL: 1660 FWL & 1850 FNL
AT TOTAL DEPTH: 1660 FWL & 1850 FNL

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* ☐

SUBSEQUENT REPORT OF:

(other) 4-1/2" csg setting depth

5. LEASE
Jicarilla Lease #93

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jicarilla 93

9. WELL NO.
#12

10. FIELD OR WILDCAT NAME
Blanco MV / Gavilan PC

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 34, T27N, R3W

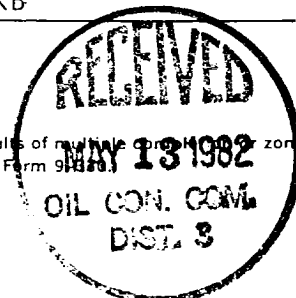
12. COUNTY OR PARISH
Rio Arriba

13. STATE
N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
7164' KB

(NOTE: Report results of multiple completion zone change on Form 9-331-C)



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.)*

4-30-82 TD'd hole at 6225'. Gearhart ran IES, SNP/CDL/GR logs. Gauged well at TD TSTM. Prep to run 4-1/2" liner.

5-1-82 Ran 56 jts (2279') of 4-1/2" 10.5#, K-55, ST&C & set at 6225' KB. Top of liner hanger at 3946' KB. National cmt'd w/ 225 sx C1 "B" w/ 4% gel & 12-1/2# gil/sx (403 cu.ft). Plug displaced w/ 61 bbls & down at 1100 hrs 5-1-82. Circ out 10 bbls good cmt. Rig released at 1800 hrs 5-1-82.

NOW WAITING ON COMPLETION.

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

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

SIGNED Donna J. Brace TITLE Production Clerk DATE 5-6-82
Donna J. Brace (This space for Federal or State office use)

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

djb/ 4

*See Instructions on Reverse Side

NMOCC