Form 9-331

Form Approved.

Budget Bureau No. 42-R1424 Dec. 1973 UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR I-149-IND-8465 6. IF INDIAN, ALLOTTEE OR TRIBE NAME **GEOLOGICAL SURVEY** Navajo 7. UNIT AGREEMENT NAME 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.) 8. FARM OR LEASE NAME $Blan\infty$ well **_** other 9. WELL NO. well #2A 2. NAME OF OPERATOR 10. FIELD OR WILDCAT NAME Northwest Pipeline Corporation Blanco Mesa Verde 3. ADDRESS OF OPERATOR 11. SEC., T., R., M., OR BLK. AND SURVEY OF P.O. Box 90, Farmington, N.M. 87401 AREA 12 371 91 Sec 22 T3IN NOW 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1900 751 1756 711 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: Same as above San Juan New Mexico AT TOTAL DEPTH: Same as above 14. API NO. 16. CHECK APPROFRIATE BOX TO INDICATE NATURE OF NOTICE, 30-039-22539 REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 6255' GR REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: П TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** U. S. CEOLOGICAL SURVEY ABANDON* FARMINGTON, N. M. Correction on perfs (other) 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.)* Correction: Perfed 22 holes from 4000' to 4478' instead of reading perfed 22 holes from 4000' to 4978'. GCEPTED FOR RECORD Set @ Subsurface Safety Valve: Manu. and Type _ APR 9 1981 18. I hereby certify that the foregoing is true and correct Production Clerk DATE 3-23-81

(This space for Federal or State office use) BY

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

SIGNED ..

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