

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 080146

6. IF INDIAN, ALLOTTEE OR TRIBE 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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR		San Juan 29-6 Unit	
Northwest Pipeline Corporation		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR		San Juan 29-6 Unit	
P.O. Box 90, Farmington, New Mexico 87401		9. WELL NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		52A	
1160' FSL & 1110' FEL		10. FIELD AND POOL, OR WILDCAT	
		Blanco Mesa Verde	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
		Sec. 34, T29N, R6W	
14. PERMIT NO.		12. COUNTY OR PARISH	13. STATE
		Rio Arriba	N.M.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)			
6419' GR			

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.)*

- 3-31-77 Drilled 8 3/4" hole to 3675' w/mud. Ran 7", 20#, K-55, csg. set at 3675'KB. Cemented with 100 sks. 65/35 poz w/12% gel followed by 50 sks. Cl. "B" w/2% CC. WOC.
- 4-1-77 Top of cmt. @ 2300' by temp survey. Tested 7" csg. to 600 PSI, OK.
- 4-2-77 Drilled 6 1/4" hole to 5666' w/gas.
- 4-3-77 Ran 4 1/2", 10.5#, K-55 csg. liner set from 3496' to 5662'. F.C. at 5629'. Cemented w/210 sks. Cl. "B" w/1/4 cu. ft. Gilsonite per sk. and 4% gel. WOC.
- 4-4-77 Cleaned out to 5585'. Tested csg. to 3500 PSI, held OK. Spotted 500 gal. of 7 1/2% HCl. Ran Gamma Ray-Neutron log. Perfed from 5082' to 5548' w/25 holes. Pumped 1000 gal. 7 1/2% HCl w/35 ball sealers. Fraced w/60,000 # 20/40 and 70,000 gal. slick water.
- 4-5-77 Landed 2 3/8", 4.7#, J-55 EUE tubing at 5532' KB. Shut well in for test.

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

SIGNED

D.H. Maroncelli
D.H. Maroncelli

TITLE Production Engineer

DATE

4/11/77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side