

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 a well 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: 1670 FSL & 1100 FEL
AT TOP PROD. INTERVAL: Same as above
AT TOTAL DEPTH: Same as above

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* ☐
(other) ☐

SUBSEQUENT REPORT OF:

RECEIVED
JAN 21 1982
OIL CON. COM.
DIST. 3

5. LEASE

NM 013364

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 32-8 Unit

8. FARM OR LEASE NAME

San Juan 32-8 Unit

9. WELL NO.

#11A

10. FIELD OR WILDCAT NAME

Blanco MV / Basin DK

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 21, T31N, R8W

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

14. API NO.

30-045-25230

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6580' GR

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.)*

1-14-82 to 1-17-82 Blowing MV & DK w/ compressor.

1-18-82 to 1-19-82 Blue Jet set 5-1/2" Baker Model "D" Production pkr @ 6020' KB. Ran 234 jts (7868') of 1-1/2", 2.9#, J-55, 10rd EU Vinson seamless tbg & landed at 7880' KB w/ S.N. @ 7873'. Ran 173 jts (5707') of 1-1/4" 2.3# J-55, IJ Vinson tbg and landed @ 5719' KB w/ SN.M. @ 5714'. Pumped out both plugs. Well turned over to Production Department. Rig released at 0600 hrs 1-19-82.

NOW WAITING ON IP TEST.

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 1-19-82
Donna J. Brace

(This space for Federal or State office use)

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

djb/ 7

*See Instructions on Reverse Side

NMOCC

JAN 20 1981

FARMINGTON DISTRICT
Elbert