

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. 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1695 FSL & 660 FWL NW/SW
AT TOP PROD. INTERVAL: 1695 FSL & 660 FWL
AT TOTAL DEPTH: 1695 FSL & 660 FWL

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
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☒
☐
☐
☐
☐
☐
☐

RECEIVED
DEC 01 1982

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

5. LEASE
SF 078996

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
San Juan 32-7 Unit

8. FARM OR LEASE NAME
San Juan 32-7 Unit

9. WELL NO.
#80

10. FIELD OR WILDCAT NAME
So Los Pinos Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 3, T31N, R7W

12. COUNTY OR PARISH 13. STATE
San Juan N.M.

14. API NO.
30-045-25391

15. ELEVATIONS (SHOW DF, KDS, AND WD)
6754' KB

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

11-18-82 Blue Jet ran GR/CCl & perf'd 16 holes from 3510' to 3688'. Western spearheaded 500 gal 7-1/2% HCl followed w/ 5000 gal pad to frac (2-1/2# FR/1000 gal) followed w/ 67,000# 10/20 sand at 1/2 to 1-1/2 ppg. (Total fluid to recover 1,958 bbls). Job done at 1600 hrs.

11-19-82 Flowing well back to atmosphere. Gauged well at 3599 MCF/D w/ heavy mist.

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 November 29, 1982
Donna J. Brace

(This space for Federal or State office use)

APPROVED BY B
CONDITIONS OF APPROVAL, IF ANY

TITLE

ACCEPTED FOR RECORD

djb/ 2

NMOCC

DEC 07 1982

*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY

smr