

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 079381

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  GAS WELL  OTHER

2. NAME OF OPERATOR  
Northwest Pipeline Corporation

3. ADDRESS OF OPERATOR  
P.O. Box 90, Farmington, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface 1640' FNL & 1710' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
7003' GR

7. UNIT AGREEMENT NAME

San Juan 32-8 Unit

8. FARM OR LEASE NAME

San Juan 32-8 Unit

9. WELL NO.

#36

10. FIELD AND POOL, OR WILDCAT

North Los Pinos Fruitland

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

Sec. 25, T32N, R8W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <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.)\*

- 10-2-76 MOL & RU. Spud at 9:30 PM. Drilled 12 1/4" hole to 125'.
- 10-3-76 Ran 106', 8 5/8", 24#, K-55 casing set at 119' KB. Cemented with 165 sks. Cl. "B" with 1/4" Flocele per sk. and 3% cc. Cement to surface. WOC. Tested casing & BOP to 600 PSI for 30 minutes, held OK.
- 10-8-76 Drilled 7 7/8" hole to 3440'.
- 10-9-76 Drilled 6 3/4" hole from 3440' to T.D. of 4035' w/mud. Ran IES and GR-Density logs. Ran 4012' 2 7/8", 6.4#, J-55, EUE casing set at 4025' KB. Cemented with 215 sks. 65/35 POZ with 10% gel and 12 1/2# Gilsonite per sk., followed by 130 sks. Cl. "B" with 2% gel.
- 10-10-76 Top of cement at 2050' by temperature survey. PBTB @ 4017'. Now waiting on completion.

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

SIGNED D.H. Maroncelli  
D.H. Maroncelli

TITLE Production Engineer

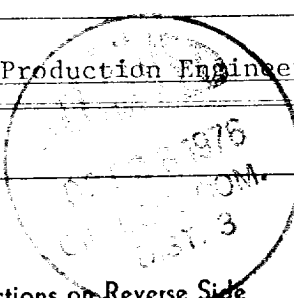
DATE 10-19-76

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_



\*See Instructions on Reverse Side

DHM/ks