5. LEASE SF 078998

## UNITED STATES DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY	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	7. UNIT AGREEMENT NAME San Juan 32-7 Unit
reservoir, Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME San Juan 32-7 Unit
1. oil gas well  well  well  well	9. WELL NO.
2. NAME OF OPERATOR	#68
Northwest Pipeline Corporation	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Basin Dakota
P.O. Box 90, Farmington, N.M. 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
below.)	Sec 34 T32N R7W
AT SURFACE: 920' FSL & 1080' FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Same as above AT TOTAL DEPTH: Same as above	San Juan   New Mexico
Same as above  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO. 30-034-24776
REPORT, OR OTHER DATA	
Mar 2007, 200 2000	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	(NOTE: Report results of method completion or cone change on Form 330.)
REPAIR WELL	(NOTE: Report results of malitial ampletion er cone
PULL OR ALTER CASING 🔲	change on Forn 330.
MULTIPLE COMPLETE	1 CCN 1987
CHANGE ZONES	OIST. COM
(other) Commence drlg operations	. 3 ~ /
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	lirectionally drilled, give subsurface locations and
1-14-81 MOL & RU. Spudded 12-1/4" s Ran 9 jts (346') of 9-5/8", 36#, Cemented w/ 185 sx C1 "B" w/ 1/4# Plug down at 2330 hrs 1-14/81.	K-55, ST&C set at 360' KB.
1-15-81 to 1-17-81 Drlg ahead.	
1-18-81 Ran 127 jts (4000') of 7", 2 Dowell cemented w/ 75 sx 65/35 pc sx Cl "B" w/ 2% CaCl <sub>2</sub> . Displaced @ 2300 hrs.	oz w/ 12% gel. Tailed w/ 75
1-19-81 to 1-20-81 Drlg ahead.	
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED Donna G. Brace Production	
(This space for Federal or State of	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
VMnce NMnce	
77/11/V	