

DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

(Other instructions on reverse side)

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		5. LEASE DESIGNATION AND SERIAL NO. NM03190
2. NAME OF OPERATOR Northwest Pipeline Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 3539 East 30th Street - Farmington, NM 87402		7. UNIT AGREEMENT NAME Cox Canyon Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  Unit A 812' FNL & 1079' FEL		8. FARM OR LEASE NAME Cox Canyon Unit
14. PERMIT NO. API #30 045 27872		9. WELL NO. #203
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6700' GR		10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T32N, R11W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input checked="" 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.)\*

See attached Changes

RECEIVED  
NOV 16 1990  
OIL CON. DIV  
DIST. 3

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

SIGNED Butch Milleson TITLE Prod. Coordinator DATE 11-14-90  
Butch Milleson

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

APPROVED

NOV 15 1990

AREA MANAGER

\*See Instructions on Reverse Side

## CHANGE IN OPERATIONS PLAN

### I. Hole Size & Casing

<u>Job Type</u>	<u>Hole Size</u>	<u>Casing Size</u>	<u>Wt. &amp; Grade</u>
Intermediate - Production			
A) AP	8-3/4"	7"	23# K-55
B) Change	7-7/8"	5-1/2"	15.5# K-55
Liner			
A) APD	6-1/4"	5-1/2"	23# P110
B) Change	None	None	None

### II. Cementing

A. Production Casing: 5-1/2" Volume to be determined after logs.

First Stage: Use Class "B" with 6-1/4# gilsonite/sk  
and 0.9% CF-18 (Yield = 1.19 cu.ft./sk.  
Weight = 15.5 #/gal.

"CIRCULATE A MINIMUM OF 5 HOURS BETWEEN STAGES."

Second Stage: Lead - Use Class "B" 65/35 poz with 6%  
gel, 10% salt and 1/4# cello-flake/sk  
(Yield = 2.05 cu.ft./sk, Wt = 12.38 #/gal)  
Tail - Use 50 sx Class "B" with 2% CaCl<sub>2</sub>  
and 1/4# cello-flake/sk (Yield = 1.18  
cu.ft./sk, Wt = 15.6 #/gal).

"USE 30% EXCESS OVER LOGGED WELLBORE VOLUME"

BM/ch  
MAM2.24