

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

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. JICARILLA 72 | |
| 2. NAME OF OPERATOR CHACE OIL COMPANY, INC. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache | |
| 3. ADDRESS OF OPERATOR 313 Washington S.E. Albuquerque, NM 87108 | | 7. UNIT AGREEMENT NAME | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit "M" 745' WL & 415' SL | | 8. FARM OR LEASE NAME Jicarilla 72 | |
| 14. PERMIT NO. | | 9. WELL NO. 3 | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7313 GR | | 10. FIELD AND POOL, OR WILDCAT Ballard | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 2, T23N, R4W | |
| | | 12. COUNTY OR PARISH Rio Arriba | 13. STATE 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 checked="" 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.) *

Move in workover rig, set 120' plug from 3030' to 3150'. Set 100' plug from 2800' to 2900'. Set 50' plug in surface and set marker.
Well status: Shut in.

Reason for Plugging: The lease was taken away from us under questionable circumstances.

Cover Ojo Alamo with cement inside and outside of casing

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

SIGNED Larry M. Cary TITLE President

DATE June 1, 1979

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE JUN 5 1979

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
WASHINGTON, D. C.