

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

El Paso Exploration Company

3. ADDRESS OF OPERATOR

PO Box 4289, Farmington, NM 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

790'N, 790'W

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) Change Dedication

SUBSEQUENT REPORT OF

APR 21 1983

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

Jicarilla Jt. Venture KD

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla Jt. Venture "KD"

9. WELL NO.

3

10. FIELD OR WILDCAT NAME

Chacon Dakota Associated Pool

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

Section 3, T-23-N, R-3-W, NMPM

12. COUNTY OR PARISH

Rio Arriba

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

7140' GL

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.)*

Attached is a revised C-102 in order to comply with the New Mexico Oil Conservation Division pool rules for the Chacon Dakota Associated Pool. Note the acreage dedication change from the N/2 to the W/2.

RECEIVED
APR 29 1983
OIL CON. DIV.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED

Larry W. Bink

TITLE

Project Drilling

Engineer

DATE

April 19, 1983

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY.

*See Instructions on Reverse Side

APR 20 1983

JFK

NMOCC