

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐

2. NAME OF OPERATOR
Chace Oil Company, Inc.

3. ADDRESS OF OPERATOR
313 Washington, SE, Albuquerque, NM - 87108

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

AT SURFACE: Unit "I" 1850' FSL & 790' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. 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) ☐

SUBSEQUENT REPORT OF:

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RECEIVED
OCT 28 1982

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

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

NOV 2 1982
DIST. 3

5. LEASE
Contract #47

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla Tribal Contract #47

9. WELL NO.

#1-~~47~~

10. FIELD OR WILDCAT NAME

Ballard Pictured Cliffs & Dakota

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

Sec. 12, T23N, R4W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
7384' GR

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.)*

Request permission to reperfurate Dakota and Greenhorn zones. Also request permission to test Tocito and Gallup zones, and complete, if productive.

Commingleing of Tocito & Gallup with Greenhorn and Dakota must be approved by NMDCD

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

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

SIGNED [Signature] TITLE Geologist DATE 10/26/82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
AS AMENDED
OCT 28 1982
JAMES F. SIMS
DISTRICT ENGINEER

NMDCP