5. LEASE

Jicarilla #71

UNITED STATES DEPARTMENT OF THE INTERIOR GFOLOGICAL SURVEY

GEOLOGICAL SURVEY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	410100.0.1	- <u>Jicarilla Apache</u>
CLINIDDY NOT	ICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
SUNDKI NUI	proposals to drill or to deepen or plug back to a different	# AT 9 P 14.00
eservoir. Use Form 9–331-	proposals to drill or to deepen or plug back to a different –C for such proposals.)	
		Jicarilla #71
1. oil gas well	☐ other	9. WELL NO. 5 = 5 = 5 = 5 = 5 = 5 = 5 = 5 = 5 = 5
2. NAME OF OPERA	TOR	# 7
Chace Oil Company, Inc.		10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR		S. Lindrith = Gallup Dakota
313 Washington, SE, Albuquerque, NM 87108		11. SEC., T., R., M., OR BLK. AND SURVEY O
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17		T AREA BERTS
below.) Unit "I" 2310' FSL & 990' FEL		Sec. 3 T23N, R4W-
AT SURFACE:		12. COUNTY OR PARISH 13. STATE
AT TOP PROD. II		Rio Arriba New Mexico
AT TOTAL DEPTH		14. API NO. 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,		<u> </u>
REPORT, OR OTH	HER DATA	15. ELEVATIONS (SHOW DE KOR, AND WI
	DEPORT OF	7225 KB
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:		
TEST WATER SHUT-C	PFF 님 님	MLULI
FRACTURE TREAT SHOOT OR ACIDIZE	H	1 1982
REPAIR WELL	ä ä	(NOTE: Report results of Hulliphe completing or zo change on Form 9-330 N)
PULL OR ALTER CAS		
MULTIPLE COMPLETE		DIST 8
CHANGE ZONES		
ABANDON* (other)		
Drogress Ren	ort X	
	OSED OR COMPLETED OPERATIONS (Clearly stated date of starting any proposed work. If well is	ate all pertinent details, and give pertinent date
including estimat	led date of starting any proposed work. If well is ue vertical depths for all markers and zones pertine	ent to this work.)*
measured and en		
C /10 /00	Dorr #14	កស្តីដូត ១១១ ៦
6/12/82	Day #14. 3/14 hours - Cement second stage	a with 405 eye 65/35 poz
	2% gel; 100 sxs Class B neat.	e with 400 SAS 00/00 poz;
	Plugged down at 7:15 A. M., June	all 1982 Carontated
	12 barrels of cement to surface.	
	6/11/82.	선택대 토리 그 강축하는
	0/11/02.	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
		Action of the control
		Little of the control
		The state of the s
Subcurface Safety Va	Ive: Manu. and Type	
Subsurface Safety Valve: Manu. and Type		100 100 100 100 100 100 100 100 100 100
18. I hereby certify that the foregoing is true and correct		Company of all parties of all partie
SIGNED	er A CALTITLE President	DATE June 35, 1982
	(This space for Federal or State	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
APPROVED BY	TITLE	DATE TO BE T
CONDITIONS OF APPROVAL, IF ANY:		1

*See Instructions on Reverse Side