## UNITED STATES DEPARTMENT OF THE INTERIOR

| UNITED ST   | TATES  | 5. LEASE                               | /  |                                       | 80  |        |
|---|--|--|--|---------------------------------------|---|--------|
| DEPARTMENT OF T   | THE INTERIOR   | Tribal Co                              | ntract #   | 71.                                   | -   |        |
| GEOLOGICAL SURVEY   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME   |  |                                       |   |        |
| 420204.07.2   |  | Jicarilla                              | *  | 5.                                    |   |        |
| SUNDRY NOTICES AND F  | PEPORTS ON WELLS   | 7. UNIT AGR                            | -  | ME-                                   | S £ (   |        |
| Do not use this form for proposals to drill or  | to deepen or plug back to a different  |  |  | - <del></del>                         |   |        |
| Do not use this form for proposals to drill or eservoir. Use Form 9-331-C for such proposal | is.)   | 8. FARM OR                             | LEASE NAM  | E 🚉                                   | 0 = , =   |        |
| 1. oil gas  |  | Jicarilla                              | Tribal   | Cont                                  | <b>.</b> #71  |        |
| well X well other   |  | 9. WELL NO.                            | <u>ا ا</u> الله الله الله الله الله الله الله  | -<br><del>-</del>                     |   |        |
| 2. NAME OF OPERATOR   |  | 100011                                 | है।<br>है के हैं<br>है है है   | <u>.</u>                              | <u> </u>  |        |
| Chace Oil Company, Inc.   |  | 10. FIELD OR                           | WILDCAT N  | AME                                   | 3 2 3   |        |
| 3. ADDRESS OF OPERATOR  |  | S. Lindrit                             | h Gallüp   | Dak                                   | otà   |        |
| 313 Washington, SE, Alb   | ouquerque, NM 87108  | 11. SEC., T., I<br>AREA                | R., M.; OR B   | LK. AN                                | D SURVE   | Y OR   |
| 4. LOCATION OF WELL (REPORT LOC   |  | Sec. 3, T                              | 23N R4W  | ı È                                   |   |        |
| below.) Unit "P" 79   | 90' FSL and 330' FEL   | 12. COUNTY                             | <del></del>  |                                       | TATE  |        |
| AT TOP PROD. INTERVAL:  | •  | ļ                                      | 그는 독일  | 9                                     | 5 to 2 F  | _      |
| AT TOTAL DEPTH:   |  | Rio Arrib                              | a têri   | -New                                  | _Mexico   | ــــد  |
| 6. CHECK APPROPRIATE BOX TO IN  | NDICATE NATURE OF NOTICE,  |  | 크리얼플   | 55                                    | ja stor<br>laat lu<br>limde<br>lände  |        |
| REPORT, OR OTHER DATA   |  | 15. ELEVATIO                           | NS (SHOW   |                                       |   | WD)    |
| _   |  | 7426' KB                               | કું <mark>છે</mark> કું કું  | 985                                   | मुटे ००   |        |
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| TEST WATER SHUT-OFF   |  | 5-5-6-4 B                              |  | ed bluort                             | 180 V   |        |
| FRACTURE TREAT \( \bigcup \) SHOOT OR ACIDIZE \( \bigcup \)                                 |  | ,                                      | such<br>former   | ou le                                 | <u> 유</u> 양(환경  |        |
| REPAIR WELL   |  | (NOTE: Report                          | ြင့်သည်<br>results of mu   | itiple co                             | mpletion o  | r zone |
| PULL OR ALTER CASING  | □ 60, V° °   | change                                 | e on Form 9-3  | 30.)ट्र                               |   | Ē:     |
| MULTIPLE COMPLETE   |  | 211/12                                 | n blu<br>etab<br>bod<br>bod  | <u>6.</u>                             | <u>3</u> 3.5 ≠  | Ē.     |
| CHANGE ZONES  |  | T, W                                   | # 15 E E   | 13.0                                  | Tained H  | 3      |
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| 17. DESCRIBE PROPOSED OR COMPL  | ETED OPERATIONS (Clearly stat  | e all pertinent o                      | letails, and   | give p                                | ertinent d  | iates  |
| including estimated date of startin<br>measured and true vertical depths                    | ng any proposed work. If well is of<br>for all markers and zones pertine   | firectionally drillent to this work.)* | ed, give sub   | Surface                               | e locations   | sanc   |
| measured and true vertical deptils  | to an markers and zenes per me   |  | aban<br>ye a<br>bot<br>tubi<br>nt.   |                                       | 01 10<br>110  |        |
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| 18. I hereby cartify that the foregoing is  | e true and correct   |  | s of al  | e for spe                             | tices, eith<br>qua of th<br>ge Vitises<br>the Citises<br>the Citises  |        |
| 18. Thereby curtify that the foregoing is   |  |  | 185<br>189<br>189<br>189<br>189  | 101<br>316                            | 01 1<br>02 2<br>622<br>623  |        |
| SIGNED  | President_   | DATE                                   | 10=6-82  | 9 ± ±                                 | # # # # # # # # # # # # # # # # # # #   |        |
|   | (This space for Federal or State of  | fice use)                              |  | <u> </u>                              |   |        |
|   |  |  | 17: Pro  | H H III                               | aff the<br>suiq et<br>Any i<br>and p  |        |
| APPROVED BY   | TITLE  | DATE _                                 |  |                                       |   |        |
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\*See Instructions on Reverse Side

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