

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a well or to re-enter a well.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. Reservation	
2. NAME OF OPERATOR Jicarilla Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
3. ADDRESS OF OPERATOR P. O. Box 507, Dulce, New Mexico 87528		7. UNIT AGREEMENT NAME None	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FSL, 990' FWL		8. FARM OR LEASE NAME JECO 85 "A"	
14. PERMIT NO.		9. WELL NO. #6	
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 7302 GR 7314 KB		10. FIELD AND POOL, OR WILDCAT S. Lindrith Gallup-Dk	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1, 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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <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) <u>drilling</u> <input checked="" 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.)*

9-6-85 Spud well and set 297' of 8 5/8" 24# casing at 309' KB.

9-16-85 Drilled well to TD of 7480' and set 4 1/2" 11.6# and 10.5# casing at 7480' KB. Cemented with 2 stage method with stage cementer at 3285' KB. 1st Stage cemented with 900 sx (1269 cu. ft.) 2nd Stage cemented with 500 sx (1320 cu. ft.) 65/35 Pozmix and 50 sx (59 cu. ft.) Class B neat cement. Circulated cement to surface on 2nd Stage. Set slips with 72000 lbs. and released rig at 6:00 pm on 9-16-85.

Now waiting on completion rig.

ACCEPTED FOR RECORD only
App was Unapproved
Incomplete

RECEIVED
SEP 30 1985

OIL CON. DIV.

DIST. 3

Petroleum Engineer

DATE 9-20-85

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

SIGNED Lance W. Stedje TITLE

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC