

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(Other instructions on reverse side)

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 different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		API #30 039 24341	
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 and in accordance with any State requirements. See also space 17 below.) At surface Unit "H", 2310' FNL and 800' FEL			
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7296' GR	
5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Contract #47		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
7. UNIT AGREEMENT NAME		8. FARM OR LEASE NAME Jicarilla Tribal Cont. #47	
9. WELL NO. 47-34		10. FIELD AND POOL, OR WILDCAT South Lindrith Gallup-Dakot.	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 14, T23N, R4W		12. COUNTY OR PARISH Rio Arriba	
13. STATE New Mexico			

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	CELL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANE ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) ☐	

(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.)

First delivery of gas, February 7, 1990 @ 11:20 A.M.

RECEIVED
FEB 22 1990
OIL CON. DIV./
DIST. 3

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

SIGNED Frank Walker TITLE Vice President Production DATE 2/7/90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

FEB 15 1990

*See Instructions on Reverse Side

FARMINGTON, N.M.

BY M