Form 9–331
Dec. 1973

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 'B' – 660' FNL & 1890' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE

Tribal Contract #361

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla Tribal Contract #361

9. WELL NO.

361-3-4V

10. FIELD OR WILDCAT NAME

S. Lindrith, Gallup Dakota

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

Section 4, T23N, R4W

12. COUNTY OR PARISH   13. STATE

Rio Arriba   New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

7178' GL

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

	REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☐	☐
REPAIR WELL	☐	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☐	☐
(other) X		

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

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.)*

This is a request to extend the approval of the APD for a six (6) month period.

Extended to 10/19/84

RECEIVED
MAR 29 1984
OIL CON. DIV.
DIST. 3

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

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

SIGNED _Frank Wilken_   TITLE _Engineer_   DATE _March 19, 1984_

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
MAR 26 1984
AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side