SUBMIT IN TRIPLICAT **UNITED STATES**

re•	30-043-20/8(Form approved. Budget/Bureau No. 42-R1424.
re-	5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Cont. 54
	6. IF INDIAN ALLOTTER OR TRIBE NAME Jicarilla Apache

DATE ____

DEPAR I MEI GEO	Jicarilla Cont. 54		
SUNDRY NOTICE (Do not use this form for proposals to use "APPLICATIO")	G. IF INDIAN ALLOTTER OR TRIBE NAME Jicarilla Apache		
1.			7. UNIT AGREEMENT NAME
OIL CAB WELL OTHER 2. NAME OF OPERATOR			8. FARM OR LEASE NAME
Chace Oil Company, I	nc		Jicarilla Apache 54
3. ADDRESS OF OPERATOR			9. WELL NO.
313 Washington SE A LOCATION OF WELL (Report location clear) See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Undesignsted Dek		
Unit G 1850	11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA		
			Sec. 34 T23N-R3W
14. PERMIT NO.	5. BLEVATIONS (Show whether D	F, RT, GR, etc.)	Sandoval 13. STATE
16. Check Appro	priate Box To Indicate I	Nature of Notice, Report, o	or Other Data
NOTICE OF INTENTION	TO:	SUB	SEQUENT REPORT OF:
FRACTURE TREAT MULT SHOOT OR ACIDIZE ABAN	OR ALTER CASING CIPLE COMPLETE IDON*	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACTUZING (Other)	REPAIRING WELL ALTERING CASING ABANDON MENT®
OTHER RE-ENTER OLD HO	LE ONE Clearly state all pertine y drilled, give subsurface loc	Completion or Rec	suits of multiple completion on Well ompletion Report and Log form.) ares, including estimated date of starting any critical depths for all markers and zones perti-
Propose to re-enter (1850-1950', 2750-2850 Run 7370' of 4½ inch 6994-7020 and B zone	0', 4 2 75-4375' csg. Cement a	and 6950-7050', nd perforate Dak	clean up hole ota A zone from
No additional surface reserve pit isto be a is the Contractor and mud system will be use	dug on present d h <mark>as a</mark> dequate	location. Cole	man Drilling Co.
		And the second second	
		A. Carrier	
			· · · · · · · · · · · · · · · · · · ·
18. I hereby certify that the foregoing is to	AMIN	President	DATE 2-25-77
SIGNED :	TITLE	TIEDIGEIIL	DATE 4 TAMES AND THE TAMES AND
(This space for Federal or State office t	18e) <i>U</i>		

APPROVED BY ______CONDITIONS OF APPROVAL, IF ANY: TITLE _

*See Instructions on Reverse Side