

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

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

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 "APPLICATION FOR PERMIT—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

JICARILLA 15

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

JICARILLA APACHE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

CHACE APACHE 15

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

CHACON DAKOTA

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

Sec. 20, T23N-R3W

12. COUNTY OR PARISH

Sandoval

13. STATE

NM

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 and in accordance with any State requirements.*
See also space 17 below.)
At surface

UNIT "A" 790'NL & 790'EL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR. etc.)

7324 GR

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 PLANS <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) <input checked="" type="checkbox"/>	Spudding - Setting Surface

(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.)*

12-10-76 Spudded Drilled 5' - Rig broke down
 12-11-76 to 12-18-76 Waiting on repairs to rig and water truck
 12-18-76 Drilled 203' - 13 5/8" hole, ran 200' of 10 3/4" - 28# surface casing
 12-19-76 Cemented surface with 160 sxs of Neat cement with 2% C.C.
 12-20-76 Waiting on Drilling Rig



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

SIGNED [Signature]

TITLE **President**

DATE **12-20-76**

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____