

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

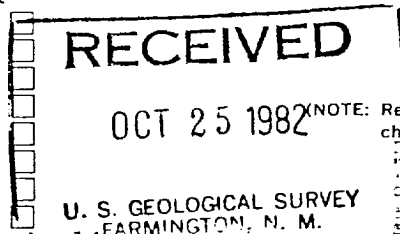
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well <input type="checkbox"/> gas well <input checked="" type="checkbox"/> other	5. LEASE NM-5452
2. NAME OF OPERATOR INTEGRATED ENERGY INC. ✓	6. IF INDIAN, ALLOTTEE OR TRIBE NAME NAVAJO
3. ADDRESS OF OPERATOR P.O. Box 61585 - HOUSTON, TEXAS 77208	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 790' FSL & 1810' FWL AT TOP PROD. INTERVAL: same AT TOTAL DEPTH: same	8. FARM OR LEASE NAME NAVAJO 18
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	9. WELL NO. 1
	10. FIELD OR WILDCAT NAME RUSTY CHACRA
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC 18 T22N R6W
	12. COUNTY OR PARISH SANDOVAL
	13. STATE NEW MEXICO
	14. API NO.
	15. ELEVATIONS (SHOW DE KOB AND WD) 6899' GR

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) intent to lay temporary pipeline



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

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.)*

We plan to lay a temporary pipeline from Navajo 18, #1 to connection into the existing pipeline (see attached plat). This pipeline will be used to determine whether or not the well is capable of producing at commercial capacity.

- pipeline will be 2-3/8" EUE tubing.
- pipeline will extend total of 1611'
- pipeline will be temporary above ground.
- proposed construction of pipeline to commence November 1982.

Connections and Sales are approved by NMOC

Subsurface Safety Valve: Manu. and Type _____ Ft.

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

SIGNED Shelley R. Swartzendruber REGULATORY AGENT DATE 10/27/82APPROVED BY
CONDITIONS OFAPPROVED (This space for Federal or State office use)
AS AMENDED

OCT 27 1982
JAMES F. SIMS
DISTRICT ENGINEER

TITLE _____ DATE _____

NMOC