Form 9-331 (31ny 1963)

UNITED STATES BUBMIT IN TRIPLICATE* Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO.

Contract 428

	•	SEOLOGICAL SOLVE!		
	SUNDRY NOT (Do not use this form for propo- Use "APPLIC	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla		
1.	OIL GAB X OTHER		7. UNIT AGREEMENT NAME	
•	NAME OF OPERATOR		8. FARM OR LEASE NAME	
		on & Robert L. Bayless :	Jicarilla 428	
•	ADDRESS OF OPERATOR		9. WELL NO.	
	P.O. Box 507. Fa:	rmington, NM 87401	9 10. FIELD AND POOL, OR WILDCAT	
4.	LOCATION OF WELL (Report location of See also space 17 below.) At surface	Ballard Pic. Cliffs		
	1650 FEL and 990	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA		
		. •	Sec. 30, T23N, R4W	
14	. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.)	12. COUNTY OF PARISH 13. STATE	
	. Ibunia	6873 G.L.	Sandoval N.M.	

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF:

	MOII	CE OF INTE	10.	1				
1 1	FEST WATER SHUT-OFF FRACTURE TREAT BHOOT OR ACIDIZE REPAIR WELL (Other)		PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON® CHANGE PLANS		WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) Frac, Pe (Note: Report rest Completion or Reco	rforate,	completion on Welt and Log form.)	

- 17. DESCRIBE PROPOSED OR COMPLETED OFFEATIONS (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.)*
 - 10-31-78 Rig up Blue Jet. Ran Correlation Log and Perforated 2170-74, 2178-84, 2187-95 per Correlation log. Total 18 holes w/2-1/8" Glass Jets.
 - 11-02-78 Rig up Western Co. fraced well w/ 50,000 lb 10/20 sand and 849Bbls slick water. Avg. inj. pressure 1650 PSIG, @ 20 BPM rate. ISDP 750 PSIG. Shut in.

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18. I hereby certify that the foregoing is true and correct	:		
SIGNED Atter Inlum	_ mini v	Engineer	DATE 11-03-78
BIGNED THE TOTAL			
(This space for Federal or State office use)			
			DATE
APPROVED BY	TITLE		DATE
CONDITIONS OF APPROVAL, IF ANY:			