

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 gas ☐ well other ☐
2. NAME OF OPERATOR
DAVE M. THOMAS, JR.
3. ADDRESS OF OPERATOR c/o Walsh Engr. & Prod.
P.O. Drawer 419, Farmington, N.M. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990'FSL, 1850'FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

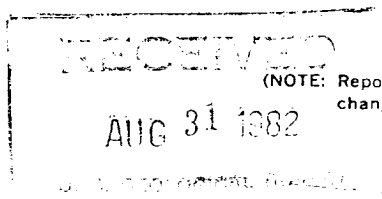
REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

(other) See Below

SUBSEQUENT REPORT OF:

- ☐
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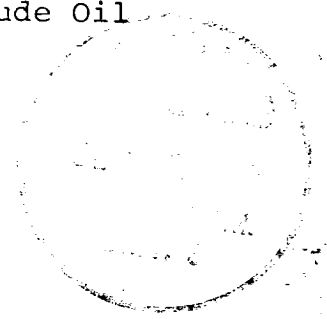


(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE
Contract No. 55-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Chacon Jicarilla Apache "D"
9. WELL NO.
111
10. FIELD OR WILDCAT NAME
Chacon Dakota Associated
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 36-T23N-R3W
N.M.P.M.
12. COUNTY OR PARISH
Sandoval
13. STATE
N.M.
14. API NO.
30-043-20639
15. ELEVATIONS (SHOW DF, KDB, AND WD)
7192'G.L.

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.)*

8/29/82 Well placed on production for Crude Oil



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

FOR: DAVE M. THOMAS, JR.

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

SIGNED EWELL N. WALSH TITLE President, Walsh Engr. & Prd. DATE 8/30/82
Ewell N. Walsh PE

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

NMOCC

SEP 1 1982

*See Instructions on Reverse Side

FARMINGTON DIST.

BY Smh