

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Lse. Contract #9

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

J. Apache "A"

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT
Otero: Pictured Cliffs and
Chacra11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 26, T25N, R5W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) Gr. 6910'
2. NAME OF OPERATOR Amerada Hess Corporation		
3. ADDRESS OF OPERATOR P.O. Drawer 817, Seminole, Texas 79360		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 960' FSL and 1690' FWL		

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"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" 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 type="checkbox"/>		<input type="checkbox"/>

(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.)*

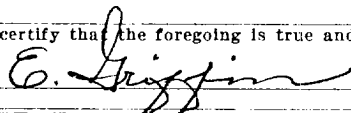
T.D. 4,020' by Driller; 4,008' by Logger

Drilled a 7-7/8" hole out under 8-5/8" surface casing at 1 AM 9/28/76 (Re: Sundry Notice Report dated 9/28/76) to total depth of 4,020', cond. hole to log, 10/3/76 and logged well by Dresser-Atlas, DILL-SP-GR 4006 to surface, CN FD W/caliper and GR 4006 to 224', checked btm. at 4,008 by wire line measurement, fin. logging at 7 PM 10/3/76. Condition hole, run, set and cemented 4 1/2" OD 10.5# K-55 new casing at 4,018' (insert float valve at 3978') with a total of 755 sx. Lo-Dense and Class C cement by B.J., finished cementing at 12 noon 10/4/76. Set slips, cut off 4 1/2" csg., N.D. BOPs and released Cactus Drlg. Co. rig at 2 PM, 10/4/76. (Had good circulation while cementing above 4 1/2" csg.)

Will move in a completion unit when one is available in the near future.

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

SIGNED



TITLE

Supervisor, Drlg. Adm. Serv.

DATE

10/5/76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side