

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.  
Jicarilla Apache Tribal  
Contract #123  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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	7. UNIT AGREEMENT NAME Jicarilla Apache
2. NAME OF OPERATOR Northwest Production Corp.	8. FARM OR LEASE NAME Jicarilla 123 C
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, New Mexico 87401	9. WELL NO. 23
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' N, 1600' W	10. FIELD AND POOL, OR WILDCAT So. Blanco Pictured Cliff
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6885' GL
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 5, T-25-N, R-4-W NMPM
	12. COUNTY OR PARISH Rio Arriba
	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <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.) \*

04-09-77 T.D. 3485'. Ran 115 joints 2 7/8", 6.4#, J-55 production casing, 3473' set at 3485'. Baffle set at 3474'. Cemented with 187 cu. ft. cement. WOC 18 hours. Top of cement at 2400'.

05-02-77 Tst casing to 4000# - ok.  
PBD 3474'. Perfed 3342', 3345', 3361', 3381', 3385', 3390' with 1 shot per zone. Frac'd with 26,000#--10/20 sand and 26,670 gallons treated water. Dropped 1 set of 12 balls each. Flushed with 840 gallons water.

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

SIGNED *D. G. Bisco*

TITLE Drilling Clerk

DATE May 4, 1977

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE