

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

5. LEASE DESIGNATION AND SERIAL NO.

Jicarilla

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Tribal

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla 35

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

S Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec 1, T24N, 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	
2. NAME OF OPERATOR ENERGY RESERVES GROUP, INC.	
3. ADDRESS OF OPERATOR P.O. BOX 3280 CASPER, WYOMING 82602	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1,550' FNL, 990' FEL (SWNE)	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 6,884'

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 type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input 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"/>
(Other) Commingle Producing Zones <input checked="" 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.)\*

This gas well was originally dually completed (03-22-77) from the Pictured Cliffs (perfs: 2,916'-19'; 2,926'-30' and 2,936'-40') and the Chacra (perfs 3,753'-60'; 3,767'-72'; 3,780'-36' and 3,877'-80'). 2 3/8" OD tubing was set at 3,856' with a packer and seal assembly at 3,017'. Approval has been granted by the New Mexico Oil & Gas Commission Order No. R-5775 dated August 1, 1978 to commingle the gas production from both zones. It is proposed to pull 1 -31' jt of tubing and add 2 -8' and 1 -6' subs to unseat the seal assembly from the packer. The bottom of the tubing will then be at 3,847'.

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

SIGNED Alan B. Barner TITLE Dist. Prod. Engr. -RMD- DATE 09-19-78

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

\*See Instructions on Reverse Side