

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. Jicarilla 70 |
| 2. NAME OF OPERATOR Chace Oil Company, Inc. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache |
| 3. ADDRESS OF OPERATOR 313 Washington SE Albuquerque, NM 87108 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit "I" 1850' SL and 790' EL | | 8. FARM OR LEASE NAME Jicarilla 70 |
| 14. PERMIT NO. | | 9. WELL NO. 7 |
| 15. ELEVATIONS (Show whether depth, etc.) 7055 GR | | 10. FIELD AND POOL, OR WILDCAT S. Lindrith Gallup Dakota |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T24N, R4W |
| | | 12. COUNTY OR PARISH Rio Arriba |
| | | 13. STATE NM |

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WASHINGTON, N. M.

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) Well Summary <input checked="" type="checkbox"/> | |
| (Other) | | (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.) *

8/9/80 Drilled surface hole 270'. Set 250.86 feet of 8-5/8" 24# surface casing and cemented with 200 sxs of Class "B" with 3% calcium chloride. Reached TD 8/22/80 7451'.

8/24/80 Set 186' joints of 4 1/2" 10.5# pipe to 7493' (shoe) with float collar at 7451'. Cement baskets set at 7068', 6730', 6428', and 6106'. Short joint of pipe set at 6092' and D.V. tool set at 3062'. Cemented first stage with 1150 sxs 50-50 posmix with 2% gel, 6# salt and 6 1/4# gilsonite per sack. Cemented second stage with 300 sxs 65-35 posmix, 12% gel, 6 1/4 gilsonite per sack followed by 50 sxs Class "B" neat.

8/28/80 Ran CCL log and perforated Dakota 7174-82', 7196-7208'. Broke down with acid and established pump rate of 40 BPM. Perforated 7332-34', 7154-56' and 7136-38'. Fracked with 81,000# 20-40 sand and 999 barrels of gel water. Set Halliburton drillable bridge plug at 6450'. Perforated 6220-25', 6234-38', 6248-55' 6260-66', 6276-82'. Broke down perforation with 3000 psig. Established flow rate of 50 BPM. Perforated 6185-91' and 6354-57'. Broke down with 100 balls.

8/29/80 Fracked with 110,665# 20-40 sand and 1506 barrels of gel water. Formation would not take full frac. Sanded off.

8/30/80 Went in with bit and tubing. Had 127' sand above bridge plug. Washed out and drilled out BP. Cleaned out well to 7416'. Well had 185 psig on surface. Landed tubing at 7340'.

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

SIGNED

TITLE

President

DATE 10/14/80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

BW

| | | | |
|-------------------|-----|--|--|
| DISTRIBUTION | | | |
| SANTA FE | | | |
| FILE | | | |
| U.S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |
| PRODUCTION OFFICE | | | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 as
Effective 1-1-65

I.

| | |
|--|---|
| Operator Chace Oil Company, Inc. | |
| Address 313 Washington SE, Albuquerque, NM 87108 | |
| Reason(s) for filing (Check proper box) | |
| New Well <input type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Other (Please explain) | |
| If change of ownership give name and address of previous owner | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|---|----------------|
| Lease Name Jicarilla 70 | Well No. 7 | Pool Name, including Formation S. Lindrith, Gallup Dakota | Kind of Lease State, Federal or Fee Indian | Location 70 |
| Location Unit Letter I ; 1850 Feet From The south Line and 790 Feet From The east | | | | |
| Line of Section 27 Township 24N Range 4W , NMPM, Rio Arriba Co | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|------------|-------------|------------|----------------------------|------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1429, Bloomfield, NM 87413 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, TX 79978 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit I | Sec. 27 | Twp. 24N | Rge. 4W | Is gas actually connected? | When |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|--------------------------------------|-----------------------------|----------|-------------------|----------|--------------|-----------|------------|-------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Rest. | Diff. |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | | | |
| Perforations | | | Depth Casing Shoe | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed 1 bbl for this depth or be for full 24 hours)

| | | | |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | G - MCF |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Frank Welker

(Signature)

Vice President Production

(Title)

March 21, 1988

(Date)

OIL CONSERVATION COMMISSION

APPROVED

MAR 22 1988

BY

SUPERVISION DISTRICT #3

TITLE

This form is to be filed in compliance with RULE 1104
If this is a request for allowable for a newly drilled or well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes in well name or number, or transporter, or other such change of

Separate Forms C-104 must be filed for each pool in