5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR

DEPARTMENT OF THE INTERIOR	Jicarilla Contract #111
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Fo 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.)	8. FARM OR LEASE NAME
1. oil	Jicarilla
well well other	9. WELL NO.
2. NAME OF OPERATOR ARCO Oil & Gas Company	103
Division of Atlantic Richfield Company	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR Suite 501	W.Lindrith-Gallup/Dakota
1860 Lincoln St., Denver, Colo 80295	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.)	5-24N-4W
AT SURFACE: 2150 FSL & 980 FWL Sec 5 AT TOP PROD. INTERVAL: (NW SW) (Up i + T.)	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: (NW SW) (Unit L)	Rio Arriba New Mexico
AT TOTAL DEPTH: (NW SW) (OHILL L)	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-039-22034
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6745' GL; 6759' KB
TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING [] [] MULTIPLE COMPLETE []	change on Form 9-330.)
CHANGE ZONES	
ABANDON*	그 그는 그 이 그 중점하였다. 뭐하네요. 그 그래
(cther) N.O. Spud & Set surface csg.	
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.)*	
MI RURT	
Spud $12-1/4$ " hole @ 9:00 a.m. 6-25-79.	
24#, K-55, ST&C (347.54') @ 345'KB. Ce	mented w/ 300 sks Class "H"
2% CaCl, 1/4#/sk flocele. Circulated 1	5 bbls. slurry to pit.
63 bbls. slurry displaced w/ 19-1/2 BW.	
Tested blind & pipe rams to 1000# for 3	0 mins each, Held OK.
	19
	19, 11.
Subsurface Safety Valve: Manu. and Type	Set @Ft.
18. I hereby certify that the foregoing is true and correct Operation	s ct
S GNED AND Wirette A. J. HILE Manager	0 10 70
W. A. Walther, Jr.	DAGE 3-10-79
(This space for Federal or State off	ice use)
APPROVED BY TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	
	SEP 1 1 1979

E. S. CTOLOCIONELIC LATY

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