

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Jic 149

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

J. Apache "F"

9. WELL NO.

15

10. FIELD AND POOL, OR WILDCAT

So. Blanco Pictured Cliffs

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

Sec. 18, T25N, R5W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

N.M.

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Amerada Hess Corporation

3. ADDRESS OF OPERATOR

Drawer "D", Monument, New Mexico 88265

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1550' FSL & 1610' FWL

AUG 19 1982

U. S. GEOLOGICAL SURVEY

14. PERMIT NO.

15. ELEVATIONS (Show whether by, ft., or, etc.)

6502' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

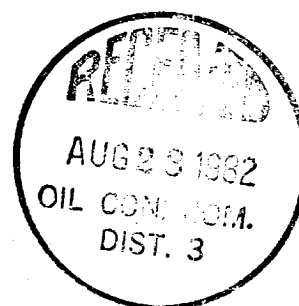
Progress Report

(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.) *

May 10, thru August 16, 1982

Closed in. Evaluating for stimulation treatment.



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

SIGNED

E. J. Hughes

TITLE

Supv. Adm. Ser.

DATE

August 16, 1982

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NMOCC

AUG 29 1982

FILED