UNITED STATES DEPARTMENT OF THE INTERIOR

	Form Approved. Budget Bureau No. 42-R1424			
	5. LEASE Jicarilla Cont. #152			
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
	7. UNIT AGREEMENT NAME			
t .	8. FARM OR LEASE NAME			
	Jicarilla 152W 9. WELL NO.			
	3E 10. FIELD OR WILDCAT NAME			
_	Basin Dakota			
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T-26-N, R-5-			
	N. M. P. M. 12. COUNTY OR PARISH 13. STATE			
	Rio Arriba New Mexico			
_				
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 8064' GL			
U 2 (NOTE) Report results of multiple completion or zone				
change on Form 9–330.)				
	CTON R N			
ate all pertinent details, and give pertinent dates, directionally drilled, give subsurface locations and ent to this work.)*				
000# 0. K. Perforated				
7934, 7939, 7974,				
	Flushed w/5210 gallons water			
1 P 2 P 2				
	20/40 sand, 26,500# 10/20 Flash			
	1 5 2 5 E			
	Set @ Ft.			
2	lerk DATE July 31, 1982			
Office use)				
	DATE			

	GEOLOGICAL SURVEY	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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME
		8. FARM OR LEASE NAME Jicarilla 152W
	1. oil gas well ₩ other	9. WELL NO.
	2. NAME OF OPERATOR	3 E
	EL PASO EXPLORATION COMPANY	10. FIELD OR WILDCAT NAME
and the traffic	3. ADDRESS OF OPERATOR	Basin Dakota
	Box 289, Farmington, N. M. 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T-26-N, R-5-
	4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 1120'N, 790'E	N.M.P.M.
	AT SURFACE:	12. COUNTY OR PARISH 13. STATE
	AT TOP PROD. INTERVAL:	Rio Arriba New Mexico
	AT TOTAL DEPTH:	14. API NO.
	16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
	REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 8064' GL
	REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	0004 GL
	TEST WATER SHUT-OFF	THE TOTAL PROPERTY OF THE PARTY
	FRACTURE TREAT	V C-
	SHOOT OR ACIDIZE	(NOTE) Report results of multiple completion or zone
	<u> </u>	(NOTE) Report results of multiple completion or zone change on Form 9-330.)
	MULTIPLE COMPLETE	And the state of t
	ABANDON*	
	(other)	
	17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent	ectionally drilled, give subsurface locations and
4 4 4 7 -	-29-82 P.B.T.D. 8063'. Tested casing to 400 7800, 7804, 7838, 7887, 7924, 7929, 7979, 7983' w/l SPZ. Fraced w/79,500# 2 sand and 86,750 gallons slick water. F	7934, 7939, 7974,
	Subsurface Safety Valve: Manu. and Type	Set @Ft. Perk DATE
	APPROVED BY TITLE TOTAL CONDITIONS OF APPROVAL, IF ANY:	AU 7 4 1982