NM

5 - USGS 1 - McHugh Form Approved. Budget Bureau No. 42-R1424 Form 9-331 Dec. 1973 UNITED STATES 5. LEASE NOO-C-14-20-4322 DEPARTMENT OF THE I 6. IF INDIAN, ALLOTTEE OR TRIBE NAME GEOLOGICAL SUE Navajo Allotted 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND RE (Do not use this form for proposals to drill or to reservoir. Use Form 9-331-C for such proposals.) 8. FARM OR LEASE NAME Chaco Plant well well XX 9. WELL NO. other 18R 2. NAME OF OPERATOR 10. FIELD OR WILDCAT NAME Jerome P. McHugh P.C. Undesignated 3. ADDRESS OF OPERATOR 11. SEC., T., R., M., OR BLK. AND SURVEY OR P O Box 208, Farmington, NM 87401 **AREA** 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 Sec 13 T26N R12W below.) 12. COUNTY OR PARISH 13. STATE 830' FNL - 2070' FWL AT SURFACE: AT TOP PROD. INTERVAL: San Juan 14. API NO. AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, 15. ELEVATIONS (SHOW DF, KDB, AND WD) REPORT, OR OTHER DATA SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE (NOTE: Report results of multiple completion or zone REPAIR WELL change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES 6. S. GLULUGICAL SURVEY ABANDON* Request testing FARMINGTON, N. M. (other)

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.)*

> Request permission to conduct additional swabbing and evaluation. We feel that this well is capable of producing significant quantities of natural gas with more swabbing and testing.

approval is valid until March 27, 1982

Subsurface Safety Valve: Manu. and Type	Set @ F	it.
18. I hereby certify that the foregoing is true and correct SIGNED 12: 11:11 E Agent DATE	1-21-82	_
APPROVED BY AMN Ellist for Education State office use) APPROVED BY AMN Ellist for Education DATE	JAN 26 1982	
CONDITIONS OF APPROVAL, IF ANY: NMOCC		