

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.

Contract No. 489

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla-Apache Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla-Apache

9. WELL NO.

16-1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA

Sec. 16-T28N-R2W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7205' GR., 7219 KB

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

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*

Supplementary History

(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.)*

Flowed back frac water at a rate of 5 bbl per day. Flowing well 8 hours each day 6 days a week. Gas volume 100 Mcf per day.

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

SIGNED

Bob Buxler

TITLE

District Production Manager

DATE

July 26, 1974

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

It

*See Instructions on Reverse Side

Open (no State copies rec'd)