

Form approved.
Budget Bureau No. 43-2245

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____		Jicarilla Apache	
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR		Chace Oil Company, Inc.		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR		313 Washington, S.E., Albuquerque, N.M. 87108		Jicarilla	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface I Unit 1740' SL, 850' EL, Sec.9, T-23-N, R-4-W		9. WELL NO.	
At top prod. interval reported below		Same		5	
At total depth		Same		10. FIELD AND HOLE OR WILDCAT	
14. PERMIT NO.		DATE ISSUED		Ballard	
		7-26-72		11. SEC., T., R., E. OR BLOCK AND SURVEY OR AREA	
15. DATE SPUDDED		16. DATE T.D. REACHED		12. COUNTY OR	
7-27-72		8-3-72		Rio Arriba	
17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		13. STATE	
8-19-72		7125 GR		N.M.	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		14. ELEV. CASING HEAD	
3031		3005		7127	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		15. WAS DIRECTIONAL SURVEY MADE	
		ROTARY TOOLS		Yes	
		0-3031		26. TYPE ELECTRIC AND OTHER LOGS RUN	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		25. WAS WELL CORDED		Induction Electric - Cement Bond	
Top 2788' BTM 2816' Pictured Cliffs		No		27. WAS WELL CORDED	
28. CASING RECORD (Report all strings set in well)		29. LINER RECORD		30. TUBING RECORD	
Casing Size Weight, lb./ft. Depth Set (MD) Hole Size Cementing Record Amount Pulled		Size Top (MD) Bottom (MD) Sacks Cement* Screen (MD)		Size Depth Set (MD) Packer Set (MD)	
8-5/8 22 99.8' 12-1/4 100 SXS		1.5" 2812' None			
4 1/2 9.5 3005 6 1/4 140 SXS					
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
2798' to 2812' 3 shots per foot		Depth Interval (MD) Amount and Kind of Material Used			
		2798' - 2812' Water-sand frag'd			
		60,000 Gals water			
		60,000 lbs. sand			
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY	
DATE FIRST PRODUCTION		Flowing		Donald Burton	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		Shut-in			
DATE OF TEST		HOURS TESTED		CHOKE SIZE	
10-31-72		3		3/4"	
PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
100		134		189	
CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.	
100		1,515		---	
WATER—BBL.		OIL GRAVITY-API (CORR.)			

35. LIST OF ATTACHMENTS		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
Potential Test and Deviation Test		SIGNED		TITLE	
		President		DATE	
				11-10-72	

*** (See Instructions and Spaces for Additional Data on Reverse Side)**

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORRELATE INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION (SED. TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Ojo Alamo Fruitland Pictured Cliffs	2332 2552 2788	2448 2604 2817	Water Water Gas				