Form	9-331
(May	1963)

UNITED STATES DEPART

SUBMIT	IN TRIPI	ICA!	re•	
(Other 1	DECRUCTION	on	re-	i-,
verse side	:)			١ ١

Form approved.

		Budget	Burea	n No.	42-K	4
`	5. LEASE	DESIGNA	TION .	AND NI	BRIAY	MC
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MENT	OF	THE	INTERIOR	verse side)	·	•
GEOLO	GIC	AL SU	RVEY			

SUNDRY NO	OTICES A	ND	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.)

Contract #413 6. IF INDIAN, ALLOTTEB OR TRIBE NAME

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OBS ALL DIOMETER	
1.	7. UNIT AGRESMENT NAME
OIL GAS WELL XX OTHER	8. FARM OR LEASE NAME
2. NAME OF OPERATOR	Charam Tinami 11a
Keesee & Thomas	Chacon Jicarilla
8. ADDRESS OF OPERATOR P. O. Box 2026, Farmington, N.M. 87401	2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	Ballard P.C. Ert.
790' FSL, 1850' FEL	Sec. 15, T 23 N, R

14. PERMIT NO.

SHOOT OR ACIDIZE

REPAIR WELL

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7339' GR.

12. COUNTY OR PARISH 13. STATE Rio Arriba N.M.

16.

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

NOTICE OF INTENTION TO: PULL OR ALTER CASING TEST WATER SHUT-OFF PRACTURE TREAT

MULTIPLE COMPLETE ABANDON* CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING REPAIRING WELL ALTERING CASING

ABANDONMENT* (Norz: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

(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 somes pertinent to this work.) *

(Other) .

Ran 100 jts, 4½", 9.50#, K-55 casing. Set @ 3247.84. Cemented with

100 sacks Class "C". P.D. 9:00 A.M., 9-21-72

06120142

U. S. GERI COICHE SURVEY DURANGO, COLO.

8. I hereby certify that the foregoing is true and correct SIGNED Clave in thomas	V TITLE Partner	DATE10-19-72
(This space for Federal or State office use)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE