

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NOO-C-14-20-5358

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

NAVAJO

9. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

RUSTY NAVAJO

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

RUSTY CHACRA

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 23, T22N, R7W

12. COUNTY OR PARISH

Sandoval

13. STATE

N.M.

1. OIL ☐ GAS ☒ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

CHACE OIL COMPANY, INC.

3. ADDRESS OF OPERATOR

313 Washington S.E., Albuquerque, NM 87108

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

Unit "A" 800' NL & 800' EL

14. PERMIT NO.

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

6850' GR

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:

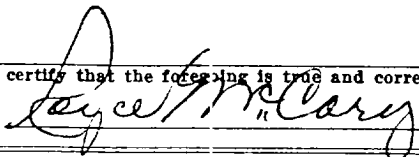
WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☒(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.)*

2/5/76 Contractor, Gene Burson, buried approx. 900' drill collars and drill pipe in hole. Could only recover 150' drill pipe. Burson went in with 1½" tbg to top of drill pipe. Pumped in 60 sxs 50-50 posmix, pulled up to 70', 20 feet up in surface pipe and pumped in 50 sxs of Halliburton lite. Came out of hole with tubing and put 20' plug in top of surface pipe. Set dry hole marker.

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

SIGNED



TITLE

President

DATE

8-76-77

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE

*See Instructions on Reverse Side