

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM-25821

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

CHACRA

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

RUSTY CHACRA

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

Sec. 10, T 22N., R7W

12. COUNTY OR PARISH 13. STATE

Sandoval

New Mexico

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
BEARD OIL COMPANY

3. ADDRESS OF OPERATOR
2000 Classen Center, 200 So., Okla. City, OK 73106

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1070' FNL & 880' FWL Sec. 10-22N-7W

14. PERMIT NO.

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

6852 GL; 6855' DF; 6856' KB

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) Spud date, setting surf csq

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.)*

Moved in, rigged up & spudded 7:00 P. M. 12-3-77. Drilled 12 1/4" hole to 90'. Set & cemented 8-5/8", 24#, K-55 ST&C surface casing @ 85' w/75 sacks of Class "B" cement with 2% CaCl. Cement circulated. Plug down 9:00 A. M. 12-4-77. Circulated approximately 25 sacks of cement. WOC.



RECEIVED

JUN 26 1978

GEOLOGICAL SURVEY

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

SIGNED James W. Vater, Jr.

TITLE Vice President

DATE 6-22-78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: