FARMHOTON DISTRICT

Dec. 1973 UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	Contract #70
DEPARIMENT OF THE INTERIOR	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
GEOLOGICAL SURVEY	Jicarilla Apache
	7. UNIT AGREEMENT NAME
SUNDRY NOTICES AND REPORTS ON WELLS	
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
reservoir. Use Form 9–331–C for such proposation	Jicarilla 70
1. oil gas other	9. WELL NO.
well well well	70-15
2. NAME OF OPERATOR Chace Oll Company, Inc.	10. FIELD OR WILDCAT NAME
	S. Lindrith - Gallup Dakota
3. ADDRESS OF OPERATOR	11. SEC., T., R., M., OR BLK. AND SURVEY OR
313 Washington, SE, Albuquerque, NM 87108	T AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Sec. 34, T24N,R4W
below.) This "O" 775' FSI, & 2175' FEL	12. COUNTY OR PARISH 13. STATE
AT SURFACE: UTILL O 773 183 G == 1 AT TOP PROD. INTERVAL:	Rio Arriba New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
16. CHECK APPROPRIATE BOX TO INDICATE TO THE REPORT, OR OTHER DATA	
REPORT, OR OTHER DATA	7120' KB
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	12.5%
TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE	(NOTE: Report results of multiple completion or zone
REPAIR WELL	change on Form 9-330.)
PULL OR ALTER CASING	3 1092
MULTIPLE COMPLETE CHANGE ZONES	
ABANDON*	ニップ (2001年) まずで表して
(other)	
Decarace Report	ate all pertinent details, and give pertinent dates,
Progress Report X 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 including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and including estimated date of starting any proposed work.	
measured and true vertical depths to	th shop on bottom /442 ND, and illoud
5/28/82: Ran 172 jts. 4 1/2" 11.6# W /442 NB/ "	72251 72011 72031 71161, 70291,
collar @ 7398.5' KB, centralizers @ 7420	packets 7049' - 6493' - 5996' - 3113'.
6734', 6343', 6115' and 3001'. Celleric L	ne in hole at 8:15. Started circu-
Short joint @ 6102'. DV TOOL 3004 . I'l	process at 8.45. 1st stage pumped
lating. Halliburton started celenting i	Cilconite and 6# salt per sack. Plug
730 sxs of 50-50 Posmix, 2% gel, 6 1/4#	of DV Tool Opened DV Tool Circu-
730 sxs of 50-50 Posmix, 2% ge1, 6 1/4# down at 10:10. Dropped bomb to close of lated for 3 hours. Pumped in 405 sxs of	65-35 Posmix, 12% gel, and 6 1/4#
lated for 3 hours. Pumped in 405 sxs of Gilsonite per sack, followed by 50 sxs (Tlass B regular cement. Plug down
Gilsonite per sack, followed by 50 sxs (WORT.
at 1:35. Circulated 5 bbls. to surface.	
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	Harris Sat Office Ft.
Subsurface Safety Valve: Manu. and Type	Set @Ft.
Supstitute out of the state and correct	
18. I hereby certify that the foregoing in true and correct	
TITLE President	DATE June 1, 1982
SIGNED (This space for Federal or State	
(This space for rederal of state	And
TITLE	
	DATE CCEPTED FUNDIEGOID
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	DATE COEPTED FUNDIEGORD
CONDITIONS OF APPROVAL, IF ANY:	DATE OCEPTED FUNDIEGORD