		FORM APPROVED
DEPARTMENT OF THE INTERIOR	Revised	Suday Survey No. 1001 6125
BUREAU OF LAND MANAGI	EMENT	Budget Bureau No 1004-0135
		Expires March 31, 1993 5. Lease Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WE		MDA 701-98-0013
Do not use this form for proposals to drill or to deepen or reentry to a	different reservoir.	6. If Indian, Allotte or Tribe Name
Use "APPLICATION FOR PERMIT" for such propo	sals.	Jicarilla Apache Tribe
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
1. Type of Well	W Co	N/A
Oil Well X Gas Well Other:		
2 Name of Operator		8. Well Name and No.
Mallon Oil Company	Oy 2000 -	Jicarilla 29-02-29 No. 1
3. Address and Telephone No.	<u> </u>	9. Well API No.
P.O. Box 3256, Carlsbad, NM 88220 C	(505) 885 4596O	30-039-26115
Location of Well (Footage, Sec., T., R., M., or Survey Description)	· · · · · · · · · · · · · · · · · · ·	10. Field and Pool, or Exploratory Area
1768' FSL and 437' FWL (NW/SW) Unit L		E. Blanco, Pictured Cliffs
Sec. 29, T29N-R02W	Story Story	11. County or Parish, State Rio Arriba County, New Mexico
	11.SI (11.11)	This Ariba County, New Mexico
12 CHECK APPROPRIATE BOX(S) TO INDICATE NA	TURE OF NOTICE, REPOR	T, OR OTHER DATA
TYPE OF SUBMISSION		FACTION
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
X Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	X Other: Spud and Surface	Dispose Water
	Casing Revised Due To Footages	(Note: Report results of multiple completion on Wall Completion or Recompletion Report and Log form.)
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estim	Casing Revised Due To Footages aled date of starting any proposed work. I	(Note: Report results of multiple completion on Wall Completion or Recompletion Report and Log form.)
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estim subsurface locations and measured and true vertical depths for all markers and zones pertinent to this zone.	Casing Revised Due To Footages aled date of starting any proposed work. I	(Note: Report results of multiple completion on Wall Completion or Recompletion Report and Log form.)
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