5. LEASE

## TED STATES DEPARTMENT OF THE INTERIOR

REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF FRACTURE TREAT  SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*  (other) Activity  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.)*  4-17-82: Flowed well down, removed well head, picked up redressed retrievable bridge plug, installed well head, trip in hole with redressed Halliburton bridge plug, set at 2572', pressure tested to 600#, rigged up Western Co., spotted 1500 gals. 15% DS-30 acid over proposed perfs 2409' to 2541', removed well head, pulled out of hole, rigged up Geo Vann, perforated high porosity zone with 2 holes per ft. at 2408', 17', 20', 30', 42', 66', 72', 90', 2503', 18', 38' (22 holes), rigged down Geo Vann, installed well head, rigged up Western Co., broke down perfs at 2700# back to 2000#, displaced acid with 100 bbls. dummy stage at 2600# at 78 bbls. per min., bled well down, removed well head, rigged up Geo Vann, perforated low porosity with 1 hole per ft. at 2413', 23', 38', 48', 56', 63', 74', 94', 2505', 16', 36', 40' (12 holes), rigged down Geo Vann, installed well head, rigged up Western Co., pumped 1500 gals. 15% DS-30 acid - Continued on Next Passusurface Safety Valve: Manu. and Type  Subsurface Safety Valve: Manu. and Type  15. ELEVATIONS (SHOW)  16. ACIDIZE  16. ACIDIZE  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates.  18. Hereby certify that the foregoing is true and correct	DEPARTMENT OF THE INTERIOR	USA, NM-15291
Second   S	GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1. oil	(Do not use this form for proposals to drill or to deepen or plus back to minerant	
2. NAME OF OPERATOR Chams Petroleum Company 3. ADDRESS OF OPERATOR 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 below) 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 below) 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 below) 4. TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: 17. SUBSEQUENT REPORT OF: 18. CHECK APPROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent detains, 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.)*  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent detains, 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.)*  18. The PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent depths for all markers and zones pertinent to this work.)*  19. WELL NO.  10. FIELDOR WILLOAT NAME  11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA  20. 34. T-19-S, R-25-E.  12. COUNTY OR PARISH 13. STARTE EACHY  14. API NO.  15. ELEVATIONS (SHOW DF, KDB, AND WD)  3527.1 GR  16. API NO.  17. COUNTY OR PARISH 13. STATE  28. COUNTY OR PARISH 13. STATE  28. COUNTY OR PARISH 14.  29. WELL NO.  20. COUNTY OR PARISH 14.  21. SEC. T., R., M., OR BLK. AND SURVEY OR AREA  29. WELL NO.  21. SEC. T., R. M.O.  22. 34. T-19-S, R-25-E.  22. COUNTY OR PARISH 14.  22. COUNTY OR PARISH 14.  22. CO		Irami Fodoral
Chams Petroleum Company  O. C. D. 3. ADDRESS OF OPERATOR  W. ARTESIA, OFFICE 5447 Glen Lakes Dr., Dallas, Texas 75231 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below) 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below) 547 TOP PROD. INTERVAL: AT TOTAL DETH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: 16. SUBSEQUENT REPORT OF: 16. CHANGE ZONES 16. CHANGE ZONES 17. CHANGE ZONES 18. SHOOT OR ACIDIZE 18. CHANGE ZONES 18. CHANGE ZONES 18. CHANGE ZONES 18. CHANGE ZONES 19. CH	well 🗵 well other Re-Enter JUN 1 6 1982	
3. ADDRESS OF OPERATOR 5447 GLEN Lakes Dr., Dallas, Texas 75231 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 660' FSL & 1980' FWL Sec. 34 AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: 1EST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACTIONES ABANDON' Glother) Activity  17. DESCRIEP 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.)  4-17-82: Flowed well down, removed well head, trip in hole with redressed Halliburton bridge plug, installed well head, trip in hole with redressed Halliburton bridge plug, set at 2572', pressure tested to 600#, rigged up Western Co., spotted 1500 gals. 15% DS-30 acid over proposed perfs 2409' to 2541', removed well head, pulled out of hole, rigged up Geo Vann, perforated high porosity zone with 2 holes per ft. at 2408', 17', 20', 30', 42', 66', 72', 90', 2503', 18', 38' (22 holes), rigged down Geo Vann, installed well head, rigged up Western Co., broke down perfs at 2700# back to 2000#, displaced acid with 100 bbls. dummy stage at 2600# at 78 bbls. per min., bled well down, removed well head, rigged down Geo Vann, installed well head, rigged up Western Co., pumped 1500 gals. 15% DS-30 acid - Continued on Next Passurface Safety Valve: Manu. and Type  Subsurface Safety Valve: Manu. and Type  18. Thereby certify that the foregoing is true and correct		1
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SIGNED DATE	18. I hereby certify that the foregoing is true and correct	
	SIGNED	DATE

ACCEPTED FOR RECORD space for Federal or State office use) APPROVED BY CONDITIONS O DATE . . \_\_\_\_\_\_ U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO