WELL

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

WELL

OTHER

Chaparral Production, Inc.

UN TED STATES DEPARTME... OF THE INTERIOR (Other interior verse side)

SUBMIT IN TRIP

MAR : _

Form approved. Budget Bureau No. 42-R1424.

•	LUAS	-	DE.	31/1	 0.1	
		_				

NM-077639						1,6
6.	IF	INDIAN,	ALLOTTEE	OR	TRIBE	NAME

TE.

	SUNDRY	NOTICES	AND	REPORTS	BN-	WELLS	
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GEOLOGICAL SURVEY

(Do not use this form for proposals to drill or to deepen or plug back to a Use "APPLICATION FOR PERMIT--" for such proposals.)

7. UNIT AGREEMENT NAME

Juniper Canyon Unit 8. FARM OR LEASE NAME

Juniper Canyon Unit 9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

W. C. Wildeal 11. SEC., T., R., M., OR BLK. AND SUBVEY OR AREA

14, T-24S, R-25E

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. 3906.1 GR

P. O. Box 1222, Oklahoma City, Oklahoma 73101

LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

1980' from North & West lines of Section 14, T-24S, R-25E

12. COUNTY OR PARISH | 13. STATE New Mexico

16.

(Other)

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO: PULL OR ALTER CASING TEST WATER SHUT-OFF MULTIPLE COMPLETE FRACTURE TREAT X ABANDON* SHOOT OR ACIDIZE X CHANGE PLANS REPAIR WELL

REPAIRING WELL WATER SHUT-OFF ALTERING CASING FRACTURE TREATMENT ABANDON MENT* SHOOTING OR ACIDIZING (Other)

SUBSEQUENT REPORT OF:

(Nore: 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.) •

- Run Temperature Survey to check if fluid is moving up or down hole (1)behind 7 5/8" liner.
- (2)If moving up hole, then perforate and squeeze liner.
- If moving down hole, then set cement plug. (3)
- Acidize producing formation with 1500 gallons of 15% mud acid. (4)
- Flow well to clean up for 4-Point tests.

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18. I hereby certify that th	e foregoing is true and correct	· · · · · · · · · · · · · · · · · · ·	/ /
SIGNED . The	A Shelly	TITLE TORALLE	DATE 2/17/72
(This space for Federal	or State office use)		
APPROVED BY	POVAT DELLAND	TITLE	DATE

*See Instructions on Reverse Side

A. CLUTTO FOR ALCORD PURE