

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42 R117
5. LEASE DESIGNATION AND SERIAL NO.

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR
Amerada Hess Corp

3. ADDRESS OF OPERATOR
P. O. BOX 2040, Tulsa Okla. 74102 Attn. J. R. Wilson, Dirg

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface 1650' FSL, 990' FWL

Jic 167

6. IN INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jic Apache I

9. WELL NO.
10

10. FIELD AND POOL, OR WILDCAT
Pictured Cliff

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 2 T23N R3W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
N. Mexico

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
7168' GR U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)*

Original plan:

Size of hole	Size of csg	Wt./ft	setting depth
11"	7-5/8"	26.4#	250'
6-3/4"	8-5/8" 2 3/8"	6.4#	3150'

New program

11"	8-5/8"	24#	300'
7-5/8"	4 1/2"	9.5#	2990'

Procedures

Set 8-5/8" surface pipe @ 300'±, drill to Td w/low loss mud, Run electric logs, set 4 1/2" production csg above Pictured cliff zone and cement 4 1/2" csg w/enough cmt to bring cmt top above the Ojo Allamo formation. Drill out 4 1/2" csg and complete well in Pictured Cliff formation.

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

SIGNED J. R. Wilson J. R. Wilson TITLE Supv. Dirg Admin Serv.

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 3-5-82

*See Instructions on Reverse Side

NMOCC

RECEIVED
MAR 10 1982
OIL CO. COM.
DIST 3

APPROVED
MAR 10 1982
Elliott
DISTRICT ENGINEER