Form Approved. Form 9-331 Budget Bureau No. 42-R1424 Dec. 1973 UNITED STATES 5. LEASE Jicarilla Tribal 396 DEPARTMENT 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. EARM OR LEASE NAME Jicarilla Tribal 396 gas 1. oil X other well well 2. NAME OF OPERATOR 10. FIELD OR WILDOAT NAME Amoco Production Company Chacon Dakota/Undes. Gallup 3. ADDRESS OF OPERATOR 501 Airport Dr., Farmington, NM 87401 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE/4, SE/4, Section 8 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 T23N, R3W below.) AT SURFACE: 1120' FSL x 820' FEL 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: Rio Arriba NM AT TOTAL DEPTH: Same 14. API NO. 30-039-22921 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, 15. ELEVATIONS (SHOW DF, KDB, AND WD) REPORT, OR OTHER DATA 7506' GL SUBSEQUENT REPORT OF REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE SURVEY change on Form 9-330.) (NOTE: Report results of multiple completion or zone REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* Requested Information (other) 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.)* On 6-9-82, a 3-1/2" liner was landed at 7792', top at 7506'. The liner was cemented with 118 cu. ft. of class B neat cement. After a 24 hour set, 45' of good cement was drilled on top of liner. The API gravity of the oil produced and the GOR for the Dakota formation are 52.6 and 35,687 respectively. The API gravity of the oil produced and the GOR for the Gallup formation are 46.7 and 35,583 respectively. Subsurface Safety Valve: Manu. and Type OIL CON. DIV. 18. I hereby certify that the foregoing is true and correct DIST 3 B.T. Roberson 10-18-82 Admin. Supvr. SIGNED. (This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY: 001 29 1982 0+4-MMS- Farm 1 - things

*See Instructions on Reverse Side

1-Onin

FARMINGTO

2mm