

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

SF-078562

6. IF INDIAN, ALLOTTEE OR TRIBE 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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL ☐ GAS ☒ OTHER ☐  
WELL WELL

2. NAME OF OPERATOR

Grace Petroleum Corporation

3. ADDRESS OF OPERATOR

3 Park Central, #200, 1515 Arapahoe St., Denver, CO. 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

790' FNL, 1720' FWL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lybrook

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Devils Fork Gallup

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec 19, T24N, R6W

12. COUNTY OR PARISH 13. STATE

Rio Arriba New Mexico

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6631' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Workover

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

The following procedure will be used for the workover on the above well:

1. Rig up service rig.
2. Pull and inspect tubulars.
3. Acidize existing perfs.
4. Complete as artificial lift well.



USGS records indicate this is a <sup>DIST 3</sup> Dual Gully-  
Dakota well. Please advise disposition of  
Dakota and date Dakota was shut in or  
abandoned.

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

SIGNED

*Scott G. Smith*

TITLE

Southern District

Operations Manager

DATE 2/8/80

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE

FEB 21 1980

CARL A. BARRICK

~~SACING~~ DISTRICT ENGINEER

\*See Instructions on Reverse Side