

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-B1424.

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. Jicarilla 70
2. NAME OF OPERATOR Chase Oil Company, Inc.	6. IF INDIAN, ALLOTTED OR TRIBE NAME Jicarilla Apache
3. ADDRESS OF OPERATOR 313 Washington, S.E., Albuquerque, N.M. 87108	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1990' FWL, 1080 FWL Section 33-T24N-24W	8. FARM OR LEASE NAME Jicarilla 70
	9. WELL NO. 3
	10. FIELD AND POOL, OR WELDCAT Undesignated
	11. SEC., T., R., S., OR BLK. AND SURVEY OR AREA Sec. 33-T24N-24W
	12. COUNTY OR PARISH 13. STATE Bio Arriba N.M.
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6928 CR, 6940 DF, 6941 KB

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" 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 notes pertinent to this work.)*

It is intended to complete this well as a downhole commingled Gallup-Dakota oil well. Further removal of free water is necessary before conducting an initial potential test prior to requesting approval of the downhole commingling from the New Mexico Oil Conservation Commission and United States Geological Survey.



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

SIGNED <u>[Signature]</u>	TITLE Petroleum Engineer Consultant	DATE March 7, 1973
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		