## UNITED STATES

	•		Bureau		42-R14	24
LEASE	-	1: 1			:	
carilla	Con	t.#	120	*.	<u> </u>	

UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	Jicarilla Cont. #120
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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. FARM OR LEASE NAME
1. oil gas well other	Jicarilla 120C
2. NAME OF OPERATOR	9. WELL NO.
El Paso Exploration Company	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	S. Blanco P.C.
Box 289, Farmington, New Mexico 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec. 31, T-26-N, R-4-W
below.) AT SURFACE: 1850' South, 800' East	NMPM
AT TOP PROD. INTERVAL:	12 COUNTY OR PARISH 13. STATE Rio Arriba New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	144 AFFINO.
REPORT, OR OTHER DATA	15 ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6754' GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE	
PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
MULTIPLE COMPLETE	change on Form 9-330.)
CHANGE ZONES	
(other) Change Name of Operator from Northwest Pr	odustion
17. DESCRIBE PROPOSED OR COMPLETED OPERAT ONS (Clearly statincluding estimated date of starting any proposed work. If well is described and true vertical depths for all markets and true vertical depths for all markets.	
measured and true vertical depths for all markers and zones pertiner	nt to this work.)*
Effective August 29, 1979, Northwest Production Con	poration was changed to El Paso
Exploration Company.	
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	NOV 9 1 1070
	2 + 19/9
	CEOLOGICAL SURVEY
	O COLO
	· volu, /
Subsurface Safety Valve: Manu. and Type	
	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
somes of filling Cler	k October 9, 1979
(This space for Federal or State offi	ice use)
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
TO THE OF AFFROYAL, IF ANY;	