| Form 9-331 (May 1963) | UNITED STATES SUBMIT IN TRIPLICATE. DEPARTMENT OF THE INTERIOR (Other instructions on re- | | | | | Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. | |
|--|--|---|---|--|--|--|--|
| | GEOLOGICAL SURVEY | | | | | Jicarilla 101 | |
| | | ICES AND RE | | WELLS to a different reserve | oir. | 6. IF INDIAN, ALLOTTER | OR TRIBE NAME |
| 1. GIL GAS WE'LL WELL X OTHER | | | | | | 7. UNIT AGREEMENT NAME | |
| 2. NAME OF OPERATOR | | | | | | 8. FARM OR LEASE NAME | |
| Southland Royalty Company 3. ADDRESS OF OPERATOR | | | | | | Jicarilla 101 | |
| P. O. Drawer 570, Farmington, New Mexico 1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1050' FSL & 1180' FEL | | | | | | #7 10. FIELD AND POOL, OR WILDCAT BASIN DAKOTA Blanco Mesa Verde 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA | |
| 14 provin vo | | 1 15 Province (Sh | | | | Sec. 12, T26N | , R4W |
| 14. PERMIT NO. | | 15. ELEVATIONS (Show whether IV. RT, CR, etc.) 691.6' GR | | | | 12. COUNTY OF PARISH Rio Arriba | 18. STATE New Messico |
| 16. | Check At | opropriate Box To | | | ort, or O | | I New Pac. 100 |
| | Check Appropriate Box To Indicate Nature of Notice, Report, or O | | | | DENT REPORT OF: | | |
| FRACTURE TREAT SHOOT OR ACIDIX REPAIR WELL (Other) 17. DESCRIBE PROPOSI proposed work nent to this wo 9-18-78 | Ran 91 join with 360 sa of Class "B | ts of 7 5/8", cks of Class " with 2% Cac ts of 5 1/2", th 415 sacks | e all pertinent debsurface locations , 26.40#, 1 "B", 50/50 2. Plug , 17 & 15.5 of Class | N-80 casing 1 D poz with 6% down at 8:15 | ort results or Recomple sent dates, i rue vertical anded a gel fo AM, 9- ang set oz with | from 3774' - 6% gel flake p | on Well of starting any and zones perti- |
| | | | | | | And the second s | |
| 18. I hereby certify | that the foregoing is | true and correct | · · · | | · | | |
| SIGNED | X / / 1/2 | | TITLE Distr | ict Productio | n Manac | ger _{DATE} 9-28- | -78 |
| (This space for l | Pederal or State office | ce use) | | | | 107177 | |
| APPROVED BYCONDITIONS OF APPROVAL, IF ANY: | | | TITLE | | · · · · · · · · · · · · · · · · · · · | _ DATE | - |
| | | | | | \$ T - | | |
| | | | | | | SIP 2 9 1073 | , |