

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

#101

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla "C"

9. WELL NO.

1-E

10. FIELD AND POOL, OR WHOLESALE
Wichita Sal
Basin Dakota

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

Sec. 11, T26N, R4W, NMPM

14. PERMIT NO.

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

7080' GL

12. COUNTY OR PARISH
Rio Arriba

13. STATE
NM

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)

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

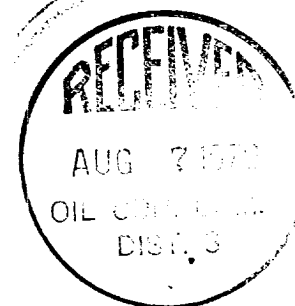
ABANDONMENT*

(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.) *

8-1-79 MOL & RU spud 13-3/4" hole 10:30 P.M. drill 298' Ran 7 jts. 10-3/4"
40.5# K-55 STC casing set @ 294' KB Cement with 300 sacks CL. B with 2% CC
Cement air plug down 4:45 a.m. 8-2-79

8-2-79 W.O.C. 12 hrs. nipple up Test B.O.P. and casing to 1200# for 1/2 hr. - OK



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

SIGNED

Caryl Moore

TITLE Production Superintendent

DATE 8-3-79

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

AUG 6 1979

U. S. GEOLOGICAL SURVEY
DURANGO, COLO.