

NAME OF NEW COMPANY
 TYPE OF COMPANY
 TYPE OF BUSINESS
 TYPE OF SERVICE
 TYPE OF PRODUCT
 TYPE OF MARKET
 TYPE OF LOCATION
 TYPE OF FINANCING
 TYPE OF EQUIPMENT
 TYPE OF PERSONNEL
 TYPE OF OTHER INFORMATION

REGISTRATION OF TRANSPORTATION OF OIL AND NATURAL GAS

NAME OF COMPANY
 ADDRESS OF COMPANY

NAME OF PERSON FOR ALLOWANCE
 AND
 ADDRESS OF PERSON FOR ALLOWANCE

Chase Energy, Inc.

c/o Allen Consulting, Inc., 1501 East 20th Street, Farmington NM 87401
 (505) 424-1111 (505) 424-1112

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 TYPE OF OTHER INFORMATION

Name of person who gave report
 and address of previous report

NAME OF PERSON GIVING REPORT

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Signature
 Secretary

9-3-85

NAME OF COMPANY

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TITLE

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IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Refractured	Plug Back	Some Restr.	Drill
Date Spudded	Date Comm. Ready to Prod.		Total Depth		P.A.T.D.				
Elevations (D.F., R.R.B., R.T., G.R., etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
Restrictions					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

V. TEST DATA AND REQUEST FOR ALLOWABLE (Text must be after recovery of total volume of fluid oil and must be equal to or exceed allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/Gas/D	Gravity of Condensate
Testing Method (pump, back pr.)	Tubing Pressure (Xhnt-Ln)	Casing Pressure (Xhnt-Ln)	Choke Size