

160-5
1985

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 ☐ GAS WELL ☐ OTHER		5. LEASE DESIGNATION AND SERIAL NO. 14-20-0603-639
2. NAME OF OPERATOR Chase Energy, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR c/o Allen Consulting 2501 E. 20th Farmington, NM		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with applicable State requirements. See also space 17 below.) At surface 1750' FNL, 2430' FEL		8. FARM OR LEASE NAME King Kong
14. PERMIT NO.		9. WELL NO. 24
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5105' GR		10. FIELD AND POOL, OR WILDCAT Salt Creek Dakota
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4 T30N R17W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

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FARMINGTON RESOURCE AREA

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PCLL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANE

(Other)

(Other) Return to Production

(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.)

It is intended to return the above captioned well to production following the procedure outlined below.

1. MIRU.
2. CO to TD.
3. Run rods, pump and tbg.
4. Set production equipment.
5. Test well.
6. Release rig.

Notify this office w/in 5 days of production start-up,
also report this well on Monthly Reports of Operation
(Form 3160-6)

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OIL CON. DIV
DIST. 2

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

SIGNED

TITLE

ACCEPTED FOR RECORD

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

BY

*See Instructions on Reverse Side