UNITED STATES SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

FRACTURE TREATMENT

Form approved. Budget Burean No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

NOO-C-14-20-5792
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

| 0501 | OCIOAL | CHOVEN |
|------|--------|--------|
| GEUL | OGICAL | SURVEY |

| JDBV | NOTICES | ΔND | REPORTS | ON | WFLIS | |
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| ז אעצ | MOHCE2 | AND | NET ON 13 | OIA | WLLLS | |

| (Do not use this form for propo | Sals to drill or to deepen or plug bandarion FOR PERMIT—" for such pro | ck to a different reservoir. | Navajo Al | llotted |
|---|--|------------------------------|--|-------------|
| OIL GAS OTHER | Dry Hole | | 7. UNIT AGREEMENT | NAME |
| 2. NAME OF OPERATOR | | | 8. FARM OR LEASE 1 | NAME |
| Filon Exploration 3. ADDRESS OF OPERATOR C/O Mi | Corporation nerals Management | Inc. | Navajo Al | llotted 25 |
| 501 Airport Dr., Sui | te 105. Farmington | n. New Mex. 87 | 401 1 | ., |
| 4. LOCATION OF WELL (Report location See also space 17 below.) At surface | clearly and in accordance with any s | state requirements. | Wildcat 11. SEC., T., R., M., C SURVEY OR AR | OR BLK, AND |
| 1900' FEL, 660' | FSI, SEC. 25, T201 15. ELEVATIONS (Show whether DF, | I , R51/1 rf, gr, etc.) | Sec. 25, T | |
| | 6633 GR - 6 | 645 RT | McKinley | New Mex. |
| 16. Check A | ppropriate Box To Indicate N | ature of Notice, Report | , or Other Data | |
| NOTICE OF INTE | NTION TO: | s | UBSEQUENT REPORT OF: | |
| | DULL OF ALMER GISING | WATER SHIM-OFF | REPAIRIN | G WELL |

ALTERING CASING

and pull

TEST WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE ABANDON* SHOOT OR ACIDIZE CHANGE PLANS REPAIR WELL (Other)

SHOOTING OR ACIDIZING (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.)*

3-11-76 Well was plugged and abandoned as follows:

ABANDONMENT*

Plug #1 3330'-3230' 100' 25 sx Ran freepoint cut casing at 1066' Plug #2 1091'-1041' 50' 25 sx Plug #3 650'- 500' 150' 65 sx 254'- 204' Plug #4 50' 25 sx 30' Plug #5 10 sx

Dry hole marker erected, location cleared. Reserve p. fenced.

CONFIDENTIAL

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| 1.50 | | _ | - | | |

| 18. | Ī | hereby | certify | that the | foregoing | is | t <i>y</i> ne | and | cofres |
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| | | | | | | | | | |

Area Manager

TITLE Minerals Management Inc pate March 12.

(This space for Federal or State office use)

APPROVED BY . CONDITIONS OF APPROVAL, IF ANY: TITLE

DATE .