Form 9-331 (May 1960)	UNITED STATES DEPARTMENT OF THE INTER GEOLOGICAL SURVEY	SUBMIT IN TRIPLICATE (Other instructions on re	Form approved. Budget Mureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. NOO-C-14-20-5248
(Do not use t	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo		
1. OIL GAS WELL 2. NAME OF OPERATOR	7. UNIT AGREEMENT NAME		
Te 3. ADDRESS OF OPERA	8. FARM OR LEASE NAME Canyon		
18	9. WELL NO. #10 10. FIELD AND FOOL, OR WILDCAT Basin Dakota 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		
4. LOCATION OF WELL See also space 17 t At surface			
14. PERMIT NO.	15. ELEVATIONS (Show whether DE 6429 GL	Sec. 22, T25N, R11 W 12. COUNTY OR PARISH 13. STATE San Juan New Mexico	
16.	Check Appropriate Box To Indicate N	1	Other Data
TEST WATER SHUT FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	MULTIPLE COMPLETE ABANDON* CHANGE PLANS	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report results	ALTERING CASING ABANDONMENT* of multiple completion on Well
nent to this work.	OR COMPLETED OPERATIONS (Clearly state all pertinen if well is directionally drilled, give subsurface local)* (3/76: Spudded 12-1/4" hole to 495' with 250 sacks of	t details, and give pertinent dates, tions and measured and true vertica	including estimated date of starting any depths for all markers and zones perti-

on cement.

RECEIVED

OCT 1 8 1976

U. S. GEOLOGICAL SUR'

8. I hereby certify that the foregoing is true and correct SIGNED		Div.	Production	Manager	DATE 10 8-76
(This space for Federal or State office use)					
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE .			(att)	Arte
				7 8 8 8 8 8 8	

*See Instructions on Reverse Side

