

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NO-G-9412-1277
2. Name of Operator Maralex Resources, Inc.	6. If Indian, Allottee or Tribe Name Navajo
3. Address and Telephone No. P.O. Box 338, Ignacio, CO 81137 970/563-4000	7. If Unit or CA, Agreement Designation CA Pending
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1800'FNL; 1500' FEL Section 26-T25N-R11W	8. Well Name and No. Gracia Navajo 26 # 21 TRACTION 2651
	9. API Well No. 30-045-29983
	10. Field and Pool, or Exploratory Area Basin Fruitland Coal
	11. Country or Parish, State San Juan County, NM

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Spud Well
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log (form.)

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.)*

Spud well at 10:00AM 12/9/99.

DEC 10 PM 1:22
OIL INFORMATION UNIT

I hereby certify that the foregoing is true and correct Signed <u>Carl A. Johnson</u> Title <u>Production Technician</u>	ACCEPTED FOR RECORD Date <u>12/9/99</u>
Approved by _____ Title _____ Conditions of approval, if any: _____	Date <u>JAN 12 2000</u> BY <u>[Signature]</u> FIELD OFFICE
U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or omissions as to any matter within its jurisdiction.	

NMOCB