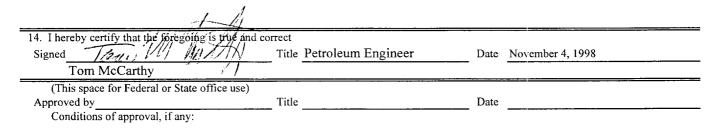
Form 3160-5 (June 1990)	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993
UNITED STATES DEPARTMENT OF THE INTERIOR	5. Lease Designation and Serial No. 14-20-603-5035
BUREAU OF LAND MANAGEMENT	6. If Indian, Allottee or Tribe Name
SUNDRY NOTICES AND REPORTS ON WELLS	Navajo
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir, Use "APPLICATION FOR PERMIT" for such proposals (1)	7. If Upi: or CA. Agreement Designation
SUBMIT IN TRIPLICATE	4 *`
1. Type of Well Oil Well X Gas Well Other	8. Well Name and No. Navajo Tribal "N" 1
2. Name of Operator	9. API Well No.
Robert L. Bayless	30-045-05809
3. Address and Telephone No.	10. Field and Pool, or Exploratory Area
PO Box 168 Farmington, NM 87499 (505)326-2659	Tocito Dome Penn "D"
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	11. County or Parish, State
Section 17, T26N, R18W 790 FSL & 790 FWL	San Juan, New Mexico
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, O	
TYPE OF SUBMISSION TYPE OF ACTION	
Abandonment	Change of Plans
Notice of Intent Recompletion	New Construction
Plugging Back	Non-Routine Fracturing
X Subsequent Report Casing Repair	Water Shut-Off
Altering Casing Others Phase and below	Conversion to Injection
Final Abandonment Notice X Other Please see below	Dispose Water Note: Report results of multiple completion on Well
	ompletion or Recompletion Report and Log form.)
13. Describe Proposed or Completed Operations (Clearly state all pertinent dates, including estimated date of	
directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*	
Well was returned to production on October 29, 1998.	and the second s
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Title 18 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 representations as to any manner within its jurisdiction.

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*See Instruction on Reverse Side

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GTON DISTRICT OFFICE