5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	Navajo Contract 14-20 603/5019 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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 Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas other other	Navajo 9. WELL NO. 1
2. NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
Mobil Oil Corporation 77046	Tocito Dome/Penn "D"
3. ADDRESS OF OFERATOR	11. SEC., T., R., M., OR BLK. AND SURVEY OR
Nine Greenway Plaza, Suite 2700, Houston Tx.	AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Sec. 9, T26N R18W
below.) AT SURFACE: 660' FSL & 660' FNL, Sec. 9,	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: T26N, R18W	San Juan - NM
AT TOTAL DEPTH:	14. API NO. 3 9 5 3 8 6 6 6 6
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	후깃병원 - 왕 왕의 왕
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	5750 GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF Li	
FRACTURE TREAT \(\Boxed{\text{U}} \) SHOOT OR ACIDIZE \(\Data \)	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	그 그 그는 그를 하는데 그를 취임하고 있다.
CHANGE ZONES	그 그 그는 그는 무취지를 가 활기활동화를 가 봤는
ABANDON* L (other) Temporarily Abandon (Hold for SWDW)	그 그는 그는 하는 한민화점 그 후 요즘예술이 됐.
X	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is different measured and true vertical depths for all markers and zones pertinent	
MI, rigged up Bedford Well svc. unseated pkr.	pumped 200 bbls. 2% KCL water
w/Tretolite WF54-POH 232 its 2 3/8" tbg. RU Dr	resser Atlas, ran gauge ring to
6265', set Baker CIBP @ 6250: Dumped 10' clas	ss A cmt. on top of BP, cmt top
@6245' Pumped 150 bbls. KCL treated water w/WF	754 in hole-Well TA; holding
for SWDW.	
John Kum	
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A. A	o Com.
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/ ','	olst.
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNEDURANA TITLE Authorized A	gent_date1/30/79
(This space for Federal or State of	fice use)
(This space to Country of State of	
APPROVED BY TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	