

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

6. LEASE DESIGNATION AND SERIAL NO.

14-20-603-5034

7. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

8. UNIT AGREEMENT NAME

9. FARM OR LEASE NAME

Navajo Tribal "U"

10. WELL NO.

17

11. FIELD AND POOL, OR WILDCAT

Tocito Dome Penn. "D"

12. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Section 22, T26N, R18W

13. COUNTY OR PARISH

San Juan

NM

1. NAME OF OPERATOR

Robert L. Bayless

2. ADDRESS OF OPERATOR

P.O. Box 168, Farmington, NM 87499

3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.)

At surface

660' FNL & 810' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

5704' GL 5717' RKB

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRAC TREATMENT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

OTHER

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRAC TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

Long term shut in

(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.)

Request approval for long term shut in. Bayless plans to rotate production of this and other wells on the lease to maximize ultimate oil recovery. Please refer to our letter to Mike Pool dated May 19, 1992. All wellhead valves will be esaled. The location will be cleaned up. The rods and/or tubing will be left as is.

RECEIVED  
JUN 5 1992  
OLCO  
FIS

APPROVAL EXPIRES

18. I hereby certify that the foregoing is true and correct

SIGNED

*Tom M. Bayless*

TITLE

Petroleum Engineer

DATE

5-20-92

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

APPROVED

JUN 5 1992  
*[Signature]*  
AREA MANAGER

\*See Instructions on Reverse Side