

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.5. LEASE DESIGNATION AND SERIAL NO.
Navajo Contract No.
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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mobil Oil Corporation		8. FARM OR LEASE NAME Navajo	
3. ADDRESS OF OPERATOR 3 Greenway Plaza East, Suite 800, Houston, Texas 77046		9. WELL NO. 3	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1050' FNL & 1845' FWL Sec. 9, T26N, R18W		10. FIELD AND POOL, OR WILDCAT Tocito Dome Penn "D"	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 9, T26N, R18W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GN 5751		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud well, set & test csg - <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.) *

9/8/77 Spudded 12 midnight, 9/8/77.9/9/77 Drld 17½" hole to 125', POH, ran 3 jts 13-3/8" 54# ST&C csg. Howco cmtd csg @ 125' w/140 sx class D + 2% CaCl₂. Circ. 25 sx. Plug down @ 7:45 pm, 9/8/77. WOC 8 hrs. Drld cmt 85-125'.9/10/77 1390', drlg. sd & sh, 12½" hole.9/11/77 Drld 12½" hole to 1625', sd & sh. Ran 41 jts 8 5/8" 24" K55 csg, set @ 1625'. Howco cmtd w/475 sx lt. wt. + 1/4# Flocele and 200 sx class B + 2% CaCl₂. Plug down 5:15 pm, 9/10/77. Circ. 50 sx, WOC, NU, test csg & BOP's to 1000#. OK.

SEP 14 1977



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

SIGNED Virginia HowardTITLE Authorized AgentDATE 9/15/77

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

cc: NMOCC, Aztec (2)

*See Instructions on Reverse Side