

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		Navajo Tribe	
2. NAME OF OPERATOR Eastern Petroleum Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 226, Farmington, New Mexico 87401		8. FARM OR LEASE NAME Navajo	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990 FSL 1830 FWL 990' FNL - 2310' FEL		9. WELL NO. #19	
		10. FIELD AND POOL, OR WILDCAT Table Mesa Rattlesnake-Dakota	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T27N, R17W	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5353 GL	12. COUNTY OR PARISH San Juan	13. STATE New Mexico

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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input 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.)*

Set the following plugs:

Dakota 1415-1271 w/18sx
Top Plug 0-10 w/3sx

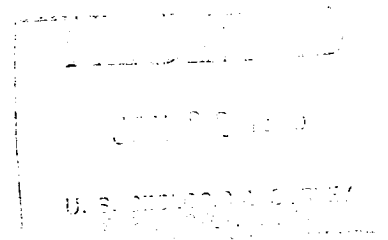
Erected a 4'4" marker and location is ready for inspection.
Csg. will remain in hole.

APPROVED

APR 12 1973

E. J. McGRATH

DISTRICT ENGINEER



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

SIGNED

Robert G. Sullivan

TITLE

Vice President

DATE

1-17-73

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side