(May 1963)		UNITED STAT	INTERIOR (Other Instructions on re-			Budget Bureau No. 42-R1424.  5. LEASE DESIGNATION AND SERIAL NO.		
		EOLOGICAL SU		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- 1	20-603-219		
				NI WELLO		DIAN, ALLOTTEE		
SUN	DRY NOT	CES AND REI	ORIS O	N 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.)						Navajo Tribe		
						7. UNIT AGREEMENT NAME		
OIL X GAB WELL	OTHER							
2. NAME OF OPERATOR						8. FARM OR LEASE NAME		
J. Gregory Merrion and Robert L. Bayless						ajo H	<del></del>	
ADDRESS OF OPERATOR		tan Novi Morri	97/		6	. NO.		
P.O. Box 507, Farmington, New Mexico 87401  4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*						10. FIELD AND POOL, OR WILDCAT		
See also space 17 below.) At surface						Totah Gallup		
						11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		
	1830	)' FNL and 18:	30' FEL	,				
						24, T29N, R14W		
4. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5357 GL						_		
· · · · · · · · · · · · · · · · · · ·		1	<del></del>			i Juan I	N.M	
16.	Check Ar	opropriate Box To	Indicate No	iture of Notice, Report, c	or Other Do	ta		
• •	MOTICE OF INTEN	TION TO:	i	´ 508.	BEQUENT REPO	RT OF:		
TEST WATER SHUT-C		PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING W	ELL	
PRACTURE TREAT	<del></del>	MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CA	SING	
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING		ABANDONMEN	<b>T</b> *	
REPAIR WELL		CHANGE PLANS		(Other) (Nore: Report_res	ults of multip	ole completion o	n Well	
	orarily Ab			Completion or Reco	mpletion Rep	ort and Log for	m.)	
Reques evalua	t permissi	ower recomple	s tempora	rily abandoned for empts and/or furth				
				.07G				
-			11111	9 to 1976				
	COMMENT	- i	300	and the VET				
TEMPORARY ABAN	DOMINA.							
TEMPORTAL HIT	11 1 100	_	U.S. Van				رة الاستفادية ( Mox II II II II II II I	
EXFIRES JU	V 1 197	7				JUN 2	9 1976	
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$\sim$	,					JOH CO		
	<u> \                             </u>				<del></del>	DIS	T 3	
18. I hereby certify tha	t the foregoing	s true and correct		Onemakar	•	Term	= 24, 1976	
SIGNED A	grz 11	WYUU-V	TITLE	Operator	D	ATE JUNE	= 44, 17/0	
(This spare for Fed	eral or State of	ice use)						
4 m m m m m m m m m m m m m m m m m m m			TITLE		n	ATE		
CONDITIONS OF A	PPROVAL, IF		******					