WELL K GAS WELL

2. NAME OF OPERATOR

FRACTURE TREAT

REPAIR WELL

SHOOT OR ACIDIZE

## **UNITED STATES** DEPARTMENT OF THE INTERIOR

Eastern Petroleum Company

331 - 963)	UNITED STATES DEPARTMENT OF THE INTERI	SUBMIT IN TRIPLICATE*  (Other instructions on reverse side)	Form approved. Budget Bureau No. 42-R1424.  5. LEASE DESIGNATION AND SERIAL NO. I-89-IND-56	
	GEOLOGICAL SURVEY  IDRY NOTICES AND REPORTS C  form for proposals to drill or to deepen or plug b  Use "APPLICATION FOR PERMIT." for such pr	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribe		
L K GAS WELL	OTHER		7. UNIT AGREEMENT NAM	E
tern Peti	coleum Company	8. FARM OR LEASE NAME Navajo		
	26, Farmington, New Mexico	9. WELL NO. #158		
ATION OF WELL (Report location clearly and in accordance with any State requirements.* also space 17 below.) surface			10. FIELD AND FOOL, OR WILDCAT Rattlesnake-Dakota	
O FSL - I	.980 FWL K	11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA  Sec. 12, T29N, R19W		
MIT NO.	15. ELEVATIONS (Show whether DF, 5378 GL	RT, GR, etc.)	12. COUNTY OR PARISH	
	Check Appropriate Box To Indicate N			
ST WATER SHUT-CACTURE TREAT OOT OR ACIDIZE PAIR WELL ther) RIBE PROPOSED O roposed work, I ent to this work.)	MULTIPLE COMPLETE  ABANDON*  CHANGE PLANS  R COMPLETED OPERATIONS (Clearly state all pertinent well is directionally drilled, give subsurface locations)	WATER SHUT-OFF  FRACTURE TREATMENT  SHOOTING OR ACIDIZING  (Other)  (NOTE: Report results of Completion or Recomple	REPAIRING WE ALTERING CAS: ABANDONMENT of multiple completion on tion Report and Log form including estimated date of depths for all markers a	Well
ll to be	plugged and abandoned - W	ill set the follow	wing plugs:	and the Committee of th
	kota "A" Bench 804-704 pp Plug 0-25	w/44sx w/6sx	And the second	

3. ADDRESS OF OPERATOR P. O. Box 226, Farmington, New Mexico 4. LOCATION OF WELL (Report location clearly and in accordance with any State Sec also space 17 below.) At surface 1980 FSL - 1980 FWL 15. ELEVATIONS (Show whether DF, RT, C 5378 GL 16. Check Appropriate Box To Indicate Natur NOTICE OF INTENTION TO: PULE OR ALTER CASING TEST WATER SHUT-OFF

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent detaproposed work. If well is directionally drilled, give subsurface locations a nent to this work.) • Well to be plugged and abandoned - Wil

Will errect a 4'4" marker and clean up location.



18. I hereby certify that the foregoing is frue and correct signed talent a fulley	TITLE Vice President	DATE 11-30-72
(This space for Federal or State office use)		
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE