

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Dry and Abon.		5. LEASE DESIGNATION AND SERIAL NO. 14-20-0603-5023	
2. NAME OF OPERATOR Eastern Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribe	
3. ADDRESS OF OPERATOR P.O. Box 291, Carmi, Illinois 62821		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660 FEL, 1980 FNL		8. FARM OR LEASE NAME Amerada-Red Wash	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5202 GL 5204 KB		10. FIELD AND POOL, OR WILDCAT Wild cat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 25, T29N; R15W	
		12. COUNTY OR PARISH San Juan	
		13. STATE N. Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<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.)\*

Well is 546 feet deep. Surface casing is 7" at 18 feet cemented with 6 sacks.  
6½" hole drilled to 546 feet. Plugged as follows:

100 foot plug-16 sacks 546-446 feet.

10 foot plug-3 sacks surface plug. Erect a 4 foot - 4 inch iron marker  
with name and legal description attached. Cleaned up location.

No. pits were made as this well was drilled with air.

Work Completed May 14, 1970

RECEIVED

MAY 26 1970

U. S. GEOLOGICAL SURVEY

I hereby certify that the foregoing is true and correct

Robert A. Fullop

TITLE Vice Pres.

DATE May 18, 1970

Space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side

