

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRI
ORIGINAL INSTRUCTIONS

TE-
75

Form approved.
Budget Bureau No. 42-R1421
LEASE DESIGNATION AND SERIAL NO.

I-89-IND-56

IF INDIAN, AGENCY OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

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. NAME OF WELL ☒ GAS WELL ☐ OTHER Dry hole

2. NAME OF OPERATOR
Eastern Petroleum Company

3. ADDRESS OF OPERATOR
P. O. Box 291, Carmi, Illinois 62821

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
Specify space 17 below)
At surface
760' PSL, 1080' FFL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, AT, OR, etc.)
5255 Gr.

Navajo Tribe

LEASE AGREEMENT NAME

NAME OF LEASE NAME

Navajo

WELL NO.

25

SECTION AND TOWNSHIP OR WILDCAT

Pattlesnake-Dakota

SECTION, T. B., M., OR BLK. AND
SUGGEST OR AREA

Sec. 2, 29N, 19W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

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

NOTICE OF INTENTION TO:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

(NOTE: Report results of multiple completion on Well Completion or Recombination Report and Log form.)

16. 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 work and zones pertinent to this work.)

Plugged well 762-562 with 125 sks. and placed a 10 ft. plug in surface w/10 sks. Erected a 4 ft. marker and cleaned up location.

ILLEGIBLE



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

SIGNED *Robert L. Dilling*

TITLE Vice President

DATE 5-12-72

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side