

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(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"/>		5. LEASE DESIGNATION AND SERIAL NO. <b>1-89-10-98</b>
2. NAME OF OPERATOR <b>W. C. IMBT</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Navajo Tribal</b>
3. ADDRESS OF OPERATOR <b>210 West 38th Street, Farmington, New Mexico - 87401</b>		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 <b>2475' FWL &amp; 2475' FWL</b>		8. FARM OR LEASE NAME <b>Navajo 18</b>
14. PERMIT NO.		9. WELL NO. <b>9</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>5170' Gr.</b>		10. FIELD AND POOL, OR WILDCAT <b>Hogback</b>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>18-129E-R16</b>
		12. COUNTY OR PARISH <b>San Juan</b>
		13. STATE <b>New Mexico</b>

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"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" 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 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.)\*

1. Drilled surface hole with cable tools.
2. Set 7" casing at 106'.
3. Cemented surface with 10 sacks.
4. Drilled out below surface pipe with rotary.
5. Cemented 4 1/2" production string at 828' with 35 sacks.
6. Drilled plug and pay with air, TD 838'.
7. Ran 2-3/8" tubing, completed open hole, turned into tanks.



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U. S. GEOLOGICAL SURVEY

18. I hereby certify ~~that the information~~ is true and correct

SIGNED W. C. IMBT TITLE Operator DATE 11-28-69

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side