

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved
Budget Bureau No. 42-R1424.
DESIGNATION: NAT. NO.

ND56
ALLOTTEE OR TRIBE NAME

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 ☐ GAS WELL ☒ OTHER	7. NAT. TRIBE
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
Eastern Petroleum Company	Navajo
3. ADDRESS OF OPERATOR	9. WELL NO.
P. O. Box 291, Carmi, Illinois 62821	10
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT
2310' FSL, 1950' FEL	Pattlesnake-Dakota
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
	Sec. 2, 29N, 19W
14. PERMIT NO.	12. COUNTY OR PARISH
	San Juan
15. ELEVATIONS (Show whether DF, RT, GK, etc.)	13. STATE
5249	New Mexico

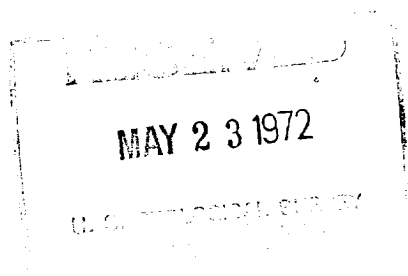
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	

(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.)*

Plugged well as per Sundry Notice dated 5-12-72



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

SIGNED <u>Robert C. Bullock</u>	TITLE <u>Vice President</u>	DATE <u>5-12-72</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____		