A PRESIDENT A merejo i rite DEPARTMENT OF THE INTERIOR (Other instructions on reverse side) Form 9-331 (May 1963) Form approved. Budget Bureau No. 42-R1424 5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-4904 GEOLOGICAL SURVEY 6. IF INDIAN, 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.) Mavajo 7. UNIT AGREEMENT NAME GAS WELL WELL X OTHER 8. FARM OR LEASE NAME 2. NAME OF OPERATOR McCulloch Sil Corp. of California Indian 3. ADDRESS OF OPERATOR 9. WELL NO. oox 234, Farmington, M. M. 87401 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 Yerde Gallup 11. SEC., T., R., M., OR BLE. AND SURVEY OR ARDA Sec. 1, T30M, R16M 1820' fwl - 5ec. 1, T304; Ri6W 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH 13. STATE 5500' D.F. San Juan #. H. 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL TEST WATER SHUT-OFF ALTERING CASING FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ABANDONMENT* ABANDON* SHOOTING OR ACIDIZING SHOOT OR ACIDIZE REPAIR WELL CHANGE PLANS (Other) . (Nors: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) 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.)*

Proposed Plugging Plan:

- spot 24 sx. cement 1550' to T.D.
- Shoot off csq. at free point.
- Spot 15 sx. cement 50' in csg. stub and 50' out csg.
- Pull csg.
- Spot 5 sx. cement plug at surface.
- Erect Dry Hole marker.



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| 8. I hereby certify that the foregoing is true and correct | | | | |
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| signed Original signou by 1. A. Di | TITLE | Agent | DATE 4/30/68 | |
| (This space for Federal or State office use) | | | | |
| APPROVED BY | TITLE | | DATE | |