Form 9–331
Dec. 1973

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9–331–C for such proposals.)

1. oil well [X]   gas well [ ]   other

2. NAME OF OPERATOR
SOLAR PETROLEUM, INC.

3. ADDRESS OF OPERATOR One Denver Place #1300
999 18th Street, Denver, CO 80202

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL & 660' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	[ ]	[ ]
FRACTURE TREAT	[X]	[ ]
SHOOT OR ACIDIZE	[ ]	[ ]
REPAIR WELL	[ ]	[ ]
PULL OR ALTER CASING	[ ]	[ ]
MULTIPLE COMPLETE	[ ]	[ ]
CHANGE ZONES	[ ]	[ ]
ABANDON*		[ ]
(other)		

Form Approved.
Budget Bureau No. 42–R1424

5. LEASE
14-20-603-2034

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Navajo Tribe of Indians 'F'

9. WELL NO.
106

10. FIELD OR WILDCAT NAME
Horseshoe Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
9-31N-17W

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

14. API NO.

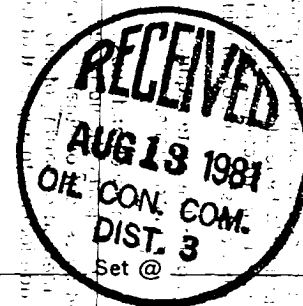15. ELEVATIONS (SHOW DF, KDB, AND WD)
5232' GR

(NOTE: Report results of multiple completion or zone change on Form 9–330.)

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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.)*

We propose to stimulate this well to increase production. The treatment will be approximately 20,000 gallons of nitrogen-foamed oil (6,000 gal oil) and 34,500#'s sand.

RECEIVED
AUG 13 1981
OIL CON. COM.
DIST. 3

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _____ TITLE Staff Engineer DATE _____

APPROVED

(Space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL AUG 21 1981

for JAMES F. SIMS
DISTRICT ENGINEER

*See Instructions on Reverse Side

NMOCC