

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Budget Office No. 1004-0100  
Expires August 31, 1985

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. 14-20-603-2033	
2. NAME OF OPERATOR Solar Petroleum, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribe	
3. ADDRESS OF OPERATOR Suite 2900, 1099-18th Street, Denver, Colorado 80202-1999		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 1980' fSL & 1980' fWL		8. FARM OR LEASE NAME Navajo Tribe of Indians "G"	
14. PERMIT NO.		9. WELL NO. 209	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5285' GL		10. FIELD AND POOL, OR WILDCAT Many Rocks Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 1-31N-17W	
		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Casing Integrity Test <input checked="" type="checkbox"/>	
(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.)\*

8/30/88 - Pressured up on casing. Held 1000# for 15+ minutes.

BLM witness: Mark Philiber

RECEIVED  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA  
FARMINGTON, NEW MEXICO  
23 SEP -9 PM 1:57

RECEIVED  
SEP 14 1988  
OIL CON. DIV.  
DIST. 3

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

SIGNED <u>Stephanie L. Huntington</u>	TITLE <u>Engineering Technician</u>	DATE <u>9/7/88</u>
ACCEPTED FOR RECORD		

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE SEP 09 1988  
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

FARMINGTON RESOURCE AREA  
BY SPM

\*See Instructions on Reverse Side