

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse 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.<br>14-20-603-2033         |
| 2. NAME OF OPERATOR<br>SOLAR PETROLEUM, INC.  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br>Navajo                |
| 3. ADDRESS OF OPERATOR<br>999 18th St., #1300, Denver, CO 80202   | 7. UNIT AGREEMENT NAME  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations.<br>See also space 17 below.)<br>At surface<br>1330' FNL, 1330' FEL | 8. FARM OR LEASE NAME<br>Navajo Tribe of Indians 'G'          |
| 14. PERMIT NO.  | 9. WELL NO.<br>226  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>5399' GR  | 10. FIELD AND POOL, OR WILDCAT<br>Many Rocks Gallup           |
|   | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>2-31N-17W |
|   | 12. COUNTY OR PARISH<br>San Juan                              |
|   | 13. STATE<br>New Mexico                                       |

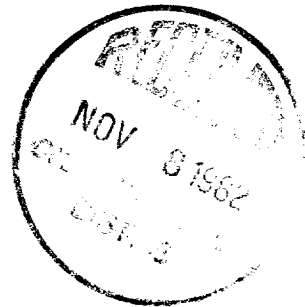
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO:                      |   | SUBSEQUENT REPORT OF:   |  |
|--|---|---|--|
| TEST WATER SHUT-OFF <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) CHANGE OF LEASE NAME <input checked="" 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.)\*

PLEASE BE ADVISED:

This well has been reported as the 'Navajo 'G' #226', the correct name is, and will be reported as the 'Navajo Tribe of Indians 'G' #226'.



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

SIGNED [Signature] TITLE Staff Petroleum Engineer DATE October 28, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

NMOCO

\*See Instructions on Reverse Side

NOV 5 1982

FARMING

RV

SM