| Worm 9-311<br>(May 1983)                                   | <b>D</b> == 0.    | UNITED STATES  | SUBMIT IN TRIPLICA  | TE. Form approved. Budget Bureau No. 42-R1424.   |
|--|-------------------|--|---|--|
|  | DEPAR             | TMENT OF THE INTER   | RIOR verse side)  | 5. LEASE DESIGNATION AND SERIAL NO.  |
| <del></del>  |                   | GEOLOGICAL SURVEY  |   | NOO-C-1420-2717  |
|  |                   | OTICES AND REPORTS  Opensis to drill or to deepen or plug  ICATION FOR PERMIT—" for such   |   | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Allotted   |
| 1. OIL GAS OTHER  2. NAME OF OPERATOR                      |                   |  |   | 7. UNIT AGREEMENT NAME   |
|  |                   |  |   | 8. FARM OR LEASE NAME  |
| FILON EXPLORATION CORPORATION 3. ADDRESS OF OPERATOR       |                   |  |   | Navajo 14C   |
| 501 Airpor 4. LOCATION OF WEL See also space 17 At surface | t Dr., S          | inerals Management uite 210. Farmingt n clearly and in accordance with an  |   |  |
| 330' FNL,  | 330' FE           | L, SEC. 14, T19N,  |   | SEC. 14, T19N, R4W   |
| 14. PERMIT NO.   |                   | 15. ELEVATIONS (Show whether the first state of the | DF, RT, GR, etc.)   | 12. COUNTY OR PARISH 13. STATE Sandoval N.M.   |
| 16.  | Check             | Appropriate Box To Indicate  |   | or Other Data  |
| NOTICE OF INTENTION TO:                                    |                   |  |   | <u></u>  |
| TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF    |                   |  |   | REPAIRING WELL   |
| FRACTURE TREAT SHOOT OR ACIDIZ                             | _                 | MULTIPLE COMPLETE ABANDON®   | FRACTURE TREATMENT SHOOTING OR ACIDIZING                              | ALTERING CASING ABANDONMENT*   |
| REPAIR WELL  | ~   <del>-</del>  | CHANGE PLANS   | (Other) Spud &  | surface casing   |
| (Other)  |                   |  | (NOTE: Report res   | sults of multiple completion on Well ompletion Report and Log form.)                           |
| 17. DESCRIBE PROPOSE proposed work. nent to this wo        | . If well is dire | OPERATIONS (Clearly state all pertine ctionally drilled, give subsurface loc   | ent details, and give pertinent de<br>ations and measured and true ve | ates, including estimated date of starting any ertical depths for all markers and zones perti- |
| 10-20-75   | Spud 15           | " hole at 10PM. I  | orill to 204'.  |  |
| 10-21-75   |                   |  | ss "B" w/2% CaCl  | Set at 197'.<br>L. Circulate cement.   |
|  |                   |  |   |  |
|  |                   |  | 24 1975   |  |
|  |                   |  | IST. 3  |  |
|  |                   |  |   | •  |
|  |                   |  |   |  |
| NOTE: T  | HIS IS A          | TIGHT HOLE.  |   |  |
|  |                   | g is true and correct  |   |  |

(This space for Federal or State office use)