

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

N00-C-19-20-5431

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for reports on drilling to deeper, ending back to a different reservoir.
(See INSTRUCTIONS FOR DRILLING REPORTS on back of page 2)

1. WELL TYPE OIL ☐ GAS ☐ WATER ☒ WIND ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR TEHACO, Inc. P.O. Box 88, Cortez, Colo. 81321	9. NAME OF WELL Navajo Tribe "BS"
4. LOCATION OF WELL (Report location clearly and fully, including any State requirements.* See instructions on back of page 2) S1/4NW1	10. FIELD AND POOL OR WILDCAT 4 Tocito Dome
11. DEPTH OF WELL (Report depth in feet and inches, including any State requirements.* See instructions on back of page 2) 1980' from North line and 311' from West line.	11. SECTION, TOWNSHIP, AND RANGE Sec. 13, T26N R18W
12. PLANT NO.	12. COUNTY OR PARISH
13. ELEVATION (In feet or meters (ft., m., etc.)) 6500' HD	13. STATE San Juan N. Mex.

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

NOTICE OF INTENTION TO

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	DATA OR ALTER CASING
FRACURE TREATMENT	MULTIPLE COMPLETION
STIMULANT OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS
(Other)	

WATER SHUT-OFF	REPAIRING WELL
FRACURE TREATMENT	ALTERING CASING
STIMULANT OR ACIDIZING	ABANDONMENT* ☒
(Other)	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

14. DRILLING, COMPLETION, OR RECOMPLETION OPERATIONS (Clearly state 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.)*

3-3-77. MI&RUSU. Perforated tbq. w/2 shots at 5000'. Set 50 sx. cmt. plug. Cut tbq. off at 3255'. Cut csg. off at 1867'. Set 50 sx. plug at 3255', 1894', and 1641'. Set 10 sx. at surface. Set proper marker, salvaged all remaining wellhead equip, cleaned up location.

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

SIGNED Alvin R. Mary TITLE Field Foreman DATE 3-31-77

(This space for Federal or State office use)

APPROVED BY _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

W 000 (3) SGS (4) GLE-ARM-7710