

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF-078895
2. NAME OF OPERATOR DEKALB Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo - NIIP
3. ADDRESS OF OPERATOR 1625 Broadway - Denver, CO 80220		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 1850' FSL & 990' FWL		8. FARM OR LEASE NAME Mudge "A"
14. PERMIT NO.		9. WELL NO. 72
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 6133'		10. FIELD AND POOL, OR WILDCAT Basin Fruitland
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T27N-R11W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) <u>Change of Operator</u>	<input checked="" type="checkbox"/>		<input checked="" 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 that the operator of the above described Mudge "A" No. 72 has been change from:

Marathon Oil Company
P.O. Box 552
Midland, TX 79702

to: DEKALB Energy Company
1625 Broadway
Denver, CO 80202

RECEIVED
NOV 08 1990
OIL CON. DIV.
(DIST. 3)

DEKALB's O&G Nationwide Bond is #19S100551745, \$150,000.

Please forward a copy of the approved Application to Drill to DEKALB Energy Company
Attention: John S. Wylie.

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

SIGNED John S. Wylie

TITLE District Superintendent ACCEPTED FOR RECORD DATE October 10, 1990

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

FARMINGTON RESOURCE AREA

BY SM

*See Instructions on Reverse Side