

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No.

5. LEASE DESIGNATION AND NO.
I-89-IND-56
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
Eastern Petroleum Company
3. ADDRESS OF OPERATOR
P. O. Box 291, Carmi, Illinois 62821
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

Navajo Tribe
7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo
9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Rattlesnake-Dakota
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 2, 29N, 19W
12. COUNTY OR PARISH 13. STATE
San Juan New Mexico

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, OR, etc.)
5234

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETION
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

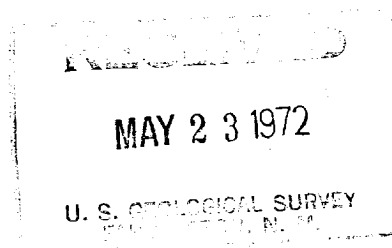
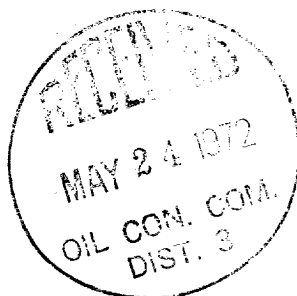
WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other)

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(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.)*

Plugged as per Sundry Notice dated 5-12-72.
Erected a 4" X 4' marker and cleaned up location.



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

SIGNED

Robert C. Sullivan

TITLE Vice President

DATE 5-12-72

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side