Form 9-331 May 1963)			SUBMIT IN TRIPLICATE* (Other instructions on re-	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.	
			14-20-603-2033		
(Do not use	SUNDRY NOTI	CES AND REPORTS (als to drill or to deepen or plug TION FOR PERMIT—" for such p	ON WELLS back to a different reservoir. roposals.)	6. IF INDIAN, ALLOTTEE	
i		<u> </u>		7. UNIT AGREEMENT NA	ME
	ELL OTHER			8. FARM OR LEASE NAM	IE .
	l & Refining	Company		Mavajo Tribe	of Indians "G"
3. ADDRESS OF OPE	CRATOR	· ·		9. WELL NO.	(MR)
P. O. Box	LL (Report location c	10. FIELD AND POOL, OR WILDCAT			
4. LOCATION OF WE See also space 1 At surface	17 below.)	Many Rocks Gallup			
	Co	N TO Continu		11. SEC., T., R., M., OR B SURVEY OR AREA	
SW SE (50	00. EST # 1300)' FEL) of Section 1	•	3 21 21 21	Tre marine
11.		15. ELEVATIONS (Show whether D	F. RT. GR. etc.)	Sec. 1-318-17	
14. PERMIT NO.		5,284' Ground	,,,	San Juan	Hew Mexico
10	CL LA		Nature of Notice, Report, or (Other Data	
16.	•	•		QUENT REPORT OF:	
	NOTICE OF INTEN			REPAIRING V	
TEST WATER S		PULL OR ALTER CASING	WATER SHUT-OFF FRACTURE TREATMENT	ALTERING C	
FRACTURE TREASHOOT OR ACID		MULTIPLE COMPLETE ABANDON*	SHOOTING OR ACIDIZING	ABANDONME	
REPAIR WELL	[<u>-</u>	CHANGE PLANS	(Other)	s of multiple completion	on Well
(Other)			Completion or Recom	pletion Report and Log for	rm.)
17. DESCRIBE PROPO proposed wo nent to this v	rk. If well is direction	RATIONS (Clearly state all pertine mally drilled, give subsurface loc	nt details, and give pertinent dates ations and measured and true verti	cal depths for all markers	s and zones perti-
13 barrescak for Pumped : of lease pump an	els of lease r 24 hours. 1500 gallons e crude. Wen d tested. Pr	crude. Went in at 1 inhibited 15% HCl de t in at 1 BFM at 100	n solvent down annulus and displayed pressure. Let so ll B0 and 40 BMPD. Pressure 11-22-69.	re. Shut in an aced with 13 ba ak 30 minutes.	d let rrels Put on
		<i>f</i>	AM 1 9 1970	JAN 9 1970	•
		J	HIT I L WI U		į
cc: H	inerals Super	oil oisor - Havajo Tribe	CON. COM DIST. 3	mote tout elem	
18. I hereby certif	fy that the foregoing		Mind Mand	. 10-	-20_6 0
SIGNED	J. for Dorrow	TITLE	Dist. Mupt.	DATE	
	or Federal or State of				
APPROVED B	OF APPROVAL, IF	ANY:		DATE	



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