

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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. ☐ OIL WELL ☐ GAS WELL ☐ OTHER water injector

2. NAME OF OPERATOR
Solar Petroleum, Inc.

3. ADDRESS OF OPERATOR
1099 18th St suite 2900 Denver, Co. 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5259 GR

5. LEASE DESIGNATION AND SERIAL NO.
14-20-603-2034

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo Tribe of Indians

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Navajo Tribe of Indians 'F'

9. WELL NO.
110

10. FIELD AND POOL, OR WILDCAT
Horseshoe Gallup - Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 3 T31N R17W

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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

(Other) convert injector to producer

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.)*

CSG: 7" 23# @ 49'
CSG: 4" 14# @ 1046'
Perf: 990'-1002'

This well is an injector, currently SI. The well has historically overpressured. Could not inject into it. We plan to clean out the well, acidize if necessary, install production equipment and put on production.

RECEIVED
MAY 05 1987
OIL COLL. DIV.
DET. 8

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

SIGNED *Marie O'Keefe*

TITLE Engineering Technician

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE 4-24-87

DATE MAY 05 1987

AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side